Missouri Long Term Care Facilities Directory

ABBEY SENIOR HEALTH				
206 NORTH MAIN ST		Telephone (636) 240-5754	Alzheimer's Unit	No
O'FALLON	MO 63366-2299	Level of Care: SNF	Bed Capacity	55
Mailing Address 206 NORTH MAIN S		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-2299	Region 5 Medicare/Medicaid	Facility Number	27367
OTTELOT	110 03300 2277	region 5 Medicare/Medicard	racinty runner	27307
ABERDEEN HEIGHTS				
505 COUCH AVE		Telephone (314) 909-6000	Alzheimer's Unit	No
KIRKWOOD	MO 63122-5536	Level of Care: SNF	Bed Capacity	38
Mailing Address 505 COUCH AVE	051 22 5550	County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7 Medicare/Medicaid	Facility Number	27570
		region		27370
ABERDEEN HEIGHTS				
505 COUCH AVE		Telephone (314) 909-6000	Alzheimer's Unit	Yes
KIRKWOOD	MO 63122-5536	Level of Care: ICF	Bed Capacity	16
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7	Facility Number	27570
ABERDEEN HEIGHTS				
505 COUCH AVE		Telephone (314) 909-6000	Alzheimer's Unit	No
KIRKWOOD	MO 63122-5536	Level of Care: ALF**	Bed Capacity	36
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7	Facility Number	27570
ACKERT PARK SKILLED NURSING 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY	G & REHABILITATION CENTER MO 63130-3239	Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY	Alzheimer's Unit Bed Capacity DMH Licensed	No 130 No
	MO 63130-3239	Region 7 Medicare/Medicaid	Facility Number	02100
ADAIR VILLAGE	MO 63130-3239	Region 7 Medicare/Medicaid	Facility Number	
	MO 63130-3239	Ü		02100
ADAIR VILLAGE 1801 N GAINES DR CLINTON	MO 63130-3239 MO 64735-1127	Telephone (660) 885-8196	Alzheimer's Unit	
1801 N GAINES DR CLINTON		Telephone (660) 885-8196 Level of Care: SNF		02100 Yes 120
1801 N GAINES DR		Telephone (660) 885-8196 Level of Care: SNF	Alzheimer's Unit Bed Capacity	02100 Yes
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR	MO 64735-1127 MO 64735-1127	Telephone (660) 885-8196 Level of Care: SNF County HENRY	Alzheimer's Unit Bed Capacity DMH Licensed	02100 Yes 120 No
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON	MO 64735-1127 MO 64735-1127	Telephone (660) 885-8196 Level of Care: SNF County HENRY	Alzheimer's Unit Bed Capacity DMH Licensed	02100 Yes 120 No
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN	MO 64735-1127 MO 64735-1127	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	02100 Yes 120 No 08521
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN 2160 SE BLUE PARKWAY	MO 64735-1127 MO 64735-1127 MMIT MO 64063-1007	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid Telephone (816) 554-0101	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	02100 Yes 120 No 08521
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN 2160 SE BLUE PARKWAY LEE'S SUMMIT	MO 64735-1127 MO 64735-1127 MMIT MO 64063-1007	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid Telephone (816) 554-0101 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	02100 Yes 120 No 08521 Yes 88
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT ADDINGTON PLACE OF SHOAL CI	MO 64735-1127 MO 64735-1127 MMIT MO 64063-1007 WAY MO 64063-1007	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 120 No 08521 Yes 88 No 28136
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT ADDINGTON PLACE OF SHOAL CI 9601 NORTH TULLIS DR	MO 64735-1127 MO 64735-1127 MMIT MO 64063-1007 WAY MO 64063-1007	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3 Telephone (816) 407-9667	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	92100 Yes 120 No 08521 Yes 88 No 28136
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT ADDINGTON PLACE OF SHOAL CI 9601 NORTH TULLIS DR KANSAS CITY	MO 64735-1127 MO 64735-1127 MMIT MO 64063-1007 WAY MO 64063-1007 REEK MO 64157-7890	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3 Telephone (816) 407-9667 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	92100 Yes 120 No 08521 Yes 88 No 28136
1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON ADDINGTON PLACE OF LEE'S SUN 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT ADDINGTON PLACE OF SHOAL CI 9601 NORTH TULLIS DR	MO 64735-1127 MO 64735-1127 MMIT MO 64063-1007 WAY MO 64063-1007 REEK MO 64157-7890	Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3 Telephone (816) 407-9667	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	92100 Yes 120 No 08521 Yes 88 No 28136

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ADVANCE ASSISTED LIVING				
252 PAYTON PLACE		Telephone (573) 722-5200	Alzheimer's Unit	No
ADVANCE	MO 63730-7251	Level of Care: ALF	Bed Capacity	44
Mailing Address PO BOX 790		County STODDARD	DMH Licensed	No
ADVANCE	MO 63730-0790	Region 2	Facility Number	28426
AKINS HEALTH CARE, INC				
4432 WEST BELLE PL		Telephone (314) 652-8908	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2617	Level of Care: RCF	Bed Capacity	20
Mailing Address 4432 WEST BELLE I	PL	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2617	Region 7	Facility Number	00078
			·	
ALLEGRO				
1055 BELLEVUE AVENUE		Telephone (314) 332-8372	Alzheimer's Unit	Yes
RICHMOND HEIGHTS	MO 63117-1827	Level of Care: ALF**	Bed Capacity	88
Mailing Address 1055 BELLEVUE AV		County SAINT LOUIS COUNTY	DMH Licensed	No
RICHMOND HEIGHTS	MO 63117-1827	Region 7	Facility Number	31437
ALLWAYS KARE RESIDENTIAL F	ACILITY, INC			
5076 WATERMAN		Telephone (314) 367-9516	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-1102	Level of Care: RCF	Bed Capacity	20
Mailing Address 5076 WATERMAN		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-1102	Region 7	Facility Number	05212
			•	
AMPROGE BARY				
AMBROSE PARK		T-1	41-1	NI-
517 NORTH OAK	MO 65205 1264	Telephone (660) 668-3140	Alzheimer's Unit	No
COLE CAMP	MO 65325-1264	Level of Care: RCF	Bed Capacity	30 N-
Mailing Address PO BOX 252	MO 65205 0252	County BENTON	DMH Licensed	No
COLE CAMP	MO 65325-0252	Region 6	Facility Number	26313
ANEW HEALTHCARE SAVANNAH				
13277 STATE ROUTE D		Telephone (816) 324-5991	Alzheimer's Unit	Yes
SAVANNAH	MO 64485-9431	Level of Care: SNF	Bed Capacity	88
Mailing Address 13277 STATE ROUT	ΈD	County ANDREW	DMH Licensed	No
SAVANNAH	MO 64485-9431	Region 4 Medicare/Medicaid	Facility Number	07147
ANEW SENIOR LIVING				
2801 NE 60TH ST		Telephone (816) 454-7755	Alzheimer's Unit	No
GLADSTONE	MO 64119-2040	Level of Care: RCF	Bed Capacity	100
	0111/ 2070		DMH Licensed	No
Mailing Address 2801 NE 60TH ST				110
Mailing Address 2801 NE 60TH ST	MO 64119-2040	•		11704
Mailing Address 2801 NE 60TH ST GLADSTONE	MO 64119-2040	Region 4	Facility Number	11794
S .	MO 64119-2040	•		11794
GLADSTONE ANNA DODSON HOME	MO 64119-2040	Region 4	Facility Number	
GLADSTONE ANNA DODSON HOME 4616 HIGHWAY D		Region 4 Telephone (573) 756-5530	Facility Number Alzheimer's Unit	No
GLADSTONE ANNA DODSON HOME 4616 HIGHWAY D FARMINGTON	MO 64119-2040 MO 63640-7241	Region 4 Telephone (573) 756-5530 Level of Care: RCF	Facility Number Alzheimer's Unit Bed Capacity	No 17
GLADSTONE ANNA DODSON HOME 4616 HIGHWAY D		Region 4 Telephone (573) 756-5530	Facility Number Alzheimer's Unit	No

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ANNA DODGON HOME			
ANNA DODSON HOME 4616 HIGHWAY D		Telephone (573) 756-5530	Alzheimer's Unit No
FARMINGTON	MO 63640-7241	Telephone (573) 756-5530 Level of Care: RCF*	Bed Capacity 20
Mailing Address 4616 HWY D	WO 03040-7241	County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-7241	·	Facility Number 02160
FARMINGTON	MO 03040-7241	Region 2	racinty Number 02100
ANNA'S HOUSE ASSISTED LIVING	G FACILITY		
25466 NORTH HWY 5		Telephone (417) 839-7637	Alzheimer's Unit No
LEBANON	MO 65536-	Level of Care: ALF	Bed Capacity 80
Mailing Address PO BOX 969		County LACLEDE	DMH Licensed No
LEBANON	MO 65536-0969	Region 1	Facility Number 08791
ANNIE'S HOUSE INC		(572) 229 1200	A11.
25228 BUZZARD DRIVE	MO (27(4.0400	Telephone (573) 238-1300	Alzheimer's Unit No
MARBLE HILL	MO 63764-9408	Level of Care: RCF	Bed Capacity 40 DMH Licensed Yes
Mailing Address 25228 BUZZARD DI		County BOLLINGER	
MARBLE HILL	MO 63764-9408	Region 2	Facility Number 30984
ANTHOLOGY OF BURLINGTON O	CREEK		
6311 NORTH COSBY AVENUE		Telephone (816) 527-8504	Alzheimer's Unit Yes
KANSAS CITY	MO 64151-2344	Level of Care: ALF**	Bed Capacity 110
Mailing Address 6311 N COSBY AVE	ENUE	County PLATTE	DMH Licensed No
KANSAS CITY	MO 64151-2344	Region 4	Facility Number 30198
ANTHOLOGY OF CLAYTON VIEW	V		
8825 EAGER ROAD		Telephone (314) 961-1700	Alzheimer's Unit Yes
SAINT LOUIS	MO 63144-1205	Level of Care: ALF**	Bed Capacity 90
Mailing Address 8825 EAGER ROAD		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63144-1205	Region 7	Facility Number 30363
ANTHOLOGY OF THE PLAZA			
2 EMANUEL CLEAVER II BLVD		Telephone (816) 505-3030	Alzheimer's Unit Yes
KANSAS CITY	MO 64112-1712	Level of Care: ALF**	Bed Capacity 96
Mailing Address 2 EMANUEL CLEA	VER II BLVD	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64112-1712	Region 3	Facility Number 31791
ANTHOLOGY OF TOWN & COUN	ΓRY		
1020 WOODS MILL ROAD		Telephone (636) 527-4444	Alzheimer's Unit Yes
TOWN AND COUNTRY	MO 63017-0603	Level of Care: ALF**	Bed Capacity 95
Mailing Address 1020 WOODS MILL		County SAINT LOUIS COUNTY	DMH Licensed No
TOWN AND COUNTRY	MO 63017-0603	Region 7	Facility Number 30612
ANTHOLOGY OF WILDWOOD			
251 PLAZA DRIVE		Telephone (636) 273-3900	Alzheimer's Unit Yes
WILDWOOD	MO 63040-1203	Level of Care: ALF**	Bed Capacity 94
Mailing Address 251 PLAZA DRIVE		County SAINT LOUIS COUNTY	DMH Licensed No
WILDWOOD	MO 63040-1203	Region 7	Facility Number 31049

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APPLE RIDGE CARE CENTER			
100 WEST THOMAS AVE		Telephone (660) 493-2232	Alzheimer's Unit Yes
WAVERLY	MO 64096-9143	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 188		County LAFAYETTE	DMH Licensed No
WAVERLY	MO 64096-0188	Region 3 Medicare/Medicaid	Facility Number 08823
		region - Medicare, Medicare	- W, - W
	_		
APPLEGATE RETIREMENT HOME	L Company of the Comp		
1204 TELEGRAPH RD		Telephone (314) 631-2003	Alzheimer's Unit No
SAINT LOUIS	MO 63125-2528	Level of Care: RCF*	Bed Capacity 38
Mailing Address 1204 TELEGRAPH R	D	County SAINT LOUIS COUNTY	DMH Licensed Yes
SAINT LOUIS	MO 63125-2528	Region 7	Facility Number 14409
APPLETON CITY MANOR			
600 NORTH OHIO ST		Telephone (660) 476-2128	Alzheimer's Unit No
APPLETON CITY	MO 64724-1609	• '	
	MO 64/24-1609	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 98		County SAINT CLAIR	DMH Licensed No
APPLETON CITY	MO 64724-0098	Region 1 Medicare/Medicaid	Facility Number 01637
ARBOR HILLS NURSING AND REH	IABILITATION CENTER		
800 CHAMBERS RD		Telephone (314) 524-1111	Alzheimer's Unit No
FERGUSON	MO 63135-2133	Level of Care: ALF**	Bed Capacity 28
Mailing Address 800 CHAMBERS RD		County SAINT LOUIS COUNTY	DMH Licensed No
FERGUSON	MO 63135-2133	Region 7	Facility Number 01435
Literation	Me	Region /	racincy (valide)
ADDOD HILL CANDDOING AND DELL	A DIL UPA TIONI CIENTED		
ARBOR HILLS NURSING AND REH	ABILITATION CENTER		
000 GILLI (DED G DD		F 1 1 (011) 501 1111	
800 CHAMBERS RD		Telephone (314) 524-1111	Alzheimer's Unit No
FERGUSON	MO 63135-2133	Level of Care: SNF	Bed Capacity 150
	MO 63135-2133	• '	
FERGUSON	MO 63135-2133 MO 63135-2133	Level of Care: SNF	Bed Capacity 150
FERGUSON Mailing Address 800 CHAMBERS RD		Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity 150 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON		Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity 150 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON	MO 63135-2133	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity 150 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- M	MO 63135-2133	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity150DMH LicensedNoFacility Number01435
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN	MO 63135-2133 MEMORY CARE ASSISTED LIVING B	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF**	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN	MO 63135-2133 MEMORY CARE ASSISTED LIVING B	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF**	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid EY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid EY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid EY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid EY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF**	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- M 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE MO 64735-2728	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- M 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE MO 64735-2728	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- M 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE MO 64735-2728 MO 64735-2728	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- M 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON ARBORS AT HARMONY GARDENS	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE MO 64735-2728 MO 64735-2728	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid SY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No Facility Number 17054
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON ARBORS AT HARMONY GARDENS 539 EAST YOUNG AVENUE WARRENSBURG	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE MO 64735-2728 MO 64735-2728 S-MEMORY CARE ASSISTED LIVING MO 64093-1228	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid EY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1 EBY AMERICARE THE Telephone (660) 429-0034 Level of Care: ALF**	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No Facility Number 17054 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No Facility Number 17054
FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON ARBORS AT DUNSFORD COURT- N 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN ARBORS AT GLENDALE GARDENS 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON ARBORS AT HARMONY GARDENS 539 EAST YOUNG AVENUE	MO 63135-2133 MEMORY CARE ASSISTED LIVING B MO 63080-1270 MO 63080-1270 S - MEMORY CARE BY AMERICARE MO 64735-2728 MO 64735-2728 S-MEMORY CARE ASSISTED LIVING MO 64093-1228	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid EY AMERICARE Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6 THE Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1 EBY AMERICARE THE Telephone (660) 429-0034	Bed Capacity 150 DMH Licensed No Facility Number 01435 Alzheimer's Unit Yes Bed Capacity 50 DMH Licensed No Facility Number 16094 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No Facility Number 17054 Alzheimer's Unit Yes Bed Capacity 42 DMH Licensed No Facility Number 17054

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ADDODG AT HIGH AND ODEGE	I WHEIMERG AGGGGED I INNIG DV	AMEDICADE D			
	ALZHEIMERS ASSISTED LIVING BY	<i>'</i>		41-1	V
620 GILASPY ROAD	MO (2501 4670	Telephone	(660) 627-8004	Alzheimer's Unit	Yes
KIRKSVILLE	MO 63501-4678	Level of Care:	ALF**	Bed Capacity	28 N-
Mailing Address 620 GILASPY RD	MO (2501 4679	County ADA	AIK	DMH Licensed	No
KIRKSVILLE	MO 63501-4678	Region 5		Facility Number	23608
ARBORS AT LAKEVIEW BEND - AS	SSISTED LIVING BY AMERICARE, T	НЕ			
1700 ASBURY CIRCLE WEST	,	Telephone	(573) 581-8777	Alzheimer's Unit	Yes
MEXICO	MO 65265-1400	Level of Care:	ALF**	Bed Capacity	39
Mailing Address 1722 HUNTINGFIELI	O DR		DRAIN	DMH Licensed	No
MEXICO	MO 65265-3808	Region 5		Facility Number	13544
ARBORS AT MOUNT CARMEL, TH	E				
723 FIRST CAPITOL DR	L	Telephone	(636) 946-4140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2729	Level of Care:	ALF**	Bed Capacity	30
Mailing Address 723 FIRST CAPITOL			NT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2729	Region 5	TVI CIII IKEES	Facility Number	29396
SAINT CHARLES	110 03301 2729	Region 5		racinty runner	29390
ARBORS AT PARKSIDE - MEMORY	CARE ASSISTED LIVING BY AMER	RICARE			
1700 EAST 10TH ST		Telephone	(573) 364-2602	Alzheimer's Unit	Yes
ROLLA	MO 65401-4600	Level of Care:	ALF**	Bed Capacity	22
Mailing Address 1700 EAST 10TH ST		County PHE	ELPS	DMH Licensed	No
ROLLA	MO 65401-4600	Region 6		Facility Number	13589
	F CUBA, MEMORY CARE ASSISTED				
903 HWY DD		Telephone	(573) 885-0551	Alzheimer's Unit	Yes
CUBA	MO 65453-8089	Level of Care:	ALF**	Bed Capacity	32
Mailing Address 903 HWY DD		•	AWFORD	DMH Licensed	No
CUBA	MO 65453-8089	Region 6		Facility Number	27071
ARBORS AT VICTORIAN PLACE O	F WASHINGTON, MEMORY CARE A	SSISTED LIVIN	G BY AMERICARE. T	гне	
2701 RABBIT TRAIL DR	,	Telephone	(636) 390-9500	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-6711	Level of Care:	ALF**	Bed Capacity	32
Mailing Address 2701 RABBIT TRAIL	DR	County FRA	ANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-6711	Region 6		Facility Number	28065
ARBORS AT WESTBROOK TERRA	CE-ALZHEIMER'S ASSISTED LIVING	G BY AMERICAL	RE		
3409 NORTH 10 MILE DR		Telephone	(573) 556-5648	Alzheimer's Unit	Yes
JEFFERSON CITY	MO 65109-0530	Level of Care:	ALF**	Bed Capacity	26
Mailing Address 3409 NORTH 10 MIL	E DR	County COI	LE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0530	Region 6		Facility Number	27914
ARBORS AT WESTRIDGE PLACE -	MEMORY CARE BY AMERICARE, T	гне			
539 NORTH WEST ST		Telephone	(573) 471-6484	Alzheimer's Unit	Yes
SIKESTON	MO 63801-5443	Level of Care:	ALF**	Bed Capacity	28
Mailing Address 539 NORTH WEST S		County SCO		DMH Licensed	No
SIKESTON	MO 63801-5443	Region 2		Facility Number	12693
		-			

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ARIZONA CARE CENTER				
101 ARIZONA ST		Telephone (573) 237-4830	Alzheimer's Unit	No
NEW HAVEN	MO 63068-1210	Level of Care: ALF	Bed Capacity	15
Mailing Address 101 ARIZONA ST		County FRANKLIN	DMH Licensed	Yes
NEW HAVEN	MO 63068-1210	Region 6	Facility Number	19080
A DATOVID O A WG GDAYOD A WYNG	COLO GINTON			
ARMOUR OAKS SENIOR LIVING 8100 WORNALL RD	COMMUNITY	T-1 (916) 262 5141	A 1-1:!- T 1-:4	No
	MO (4114 500)	Telephone (816) 363-5141	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5806	Level of Care: ALF	Bed Capacity	47 N
Mailing Address 8100 WORNALL RI		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5806	Region 3	Facility Number	00199
ARMOUR OAKS SENIOR LIVING	COMMUNITY			
8100 WORNALL RD		Telephone (816) 363-5141	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5806	Level of Care: SNF	Bed Capacity	38
Mailing Address 8100 WORNALL RI		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5806	Region 3 Medicare/Medicaid	Facility Number	00199
		region - Medicaro Medicard		001))
ARROWHEAD SENIOR LIVING CO	OMMUNITY			
6100 ARROWHEAD DRIVE		Telephone (573) 302-7111	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-	Level of Care: SNF	Bed Capacity	80
Mailing Address 6100 ARROWHEAD	D DRIVE	County CAMDEN	DMH Licensed	No
OSAGE BEACH	MO 65065-	Region 6 Medicare/Medicaid	Facility Number	31536
ARROWHEAD SENIOR LIVING CO	OMMUNITY			
6100 ARROWHEAD DRIVE		Telephone (573) 302-7111	Alzheimer's Unit	Yes
OSAGE BEACH	MO 65065-	Level of Care: ALF**	Bed Capacity	90
Mailing Address 6100 ARROWHEAD		County CAMDEN	DMH Licensed	No
OSAGE BEACH	MO 65065-	Region 6	Facility Number	31536
	110 0000	Region 0	Tuessey Tusses	31330
ASCENSION LIVING SHERBROOF	KE VILLAGE			
4005 RIPA AVE		Telephone (314) 544-1111	Alzheimer's Unit	YES
SAINT LOUIS	MO 63125-2378	Level of Care: ALF**	Bed Capacity	88
Mailing Address 4005 RIPA AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63125-2378	Region 7	Facility Number	15436
ASCENSION LIVING SHERBROOI	KE VILLAGE			
4005 RIPA AVE	, 122.102	Telephone (314) 544-1111	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63125-2378	Level of Care: SNF	Bed Capacity	149
Mailing Address 4005 RIPA AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63125-2378	Region 7 Medicare/Medicaid	Facility Number	15436
S. II. (I DOOD)	03123 2310	region / Miculcal C/Miculcald	Tuendy Humber	15+50
ASH GROVE HEALTHCARE FACI	LITY			
401 NORTH MEDICAL DR		Telephone (417) 751-2575	Alzheimer's Unit	Yes
ASH GROVE	MO 65604-1004	Level of Care: SNF	Bed Capacity	82
Mailing Address PO BOX 247		County GREENE	DMH Licensed	No

Region 1

Medicare/Medicaid

Facility Number

00200

MO 65604-0247

ASH GROVE

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ASHBROOK - ASSISTED LIVING B	Y AMERICARE		
500 ASHBROOK DR		Telephone (573) 756-5544	Alzheimer's Unit No
FARMINGTON	MO 63640-9235	Level of Care: ALF**	Bed Capacity 72
Mailing Address 500 ASHBROOK DR		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-9235	Region 2	Facility Number 18138
ASHBURY HEIGHTS OF CHILLICO	THE		
603 ST LOUIS ST	7111E	Telephone (660) 707-1270	Alzheimer's Unit No
CHILLICOTHE	MO 64601-2438	Level of Care: RCF	Bed Capacity 12
Mailing Address 603 ST LOUIS ST	110 04001 2430	County LIVINGSTON	DMH Licensed Yes
CHILLICOTHE	MO 64601-2438	Region 4	Facility Number 23909
CHILLICOTHE	MO 04001-2438	Region +	Facility Number 23909
ASHBURY HEIGHTS OF FAYETTE			
200 GROCE ST		Telephone (660) 248-3603	Alzheimer's Unit No
FAYETTE	MO 65248-9813	Level of Care: RCF	Bed Capacity 12
Mailing Address 200 GROCE ST		County HOWARD	DMH Licensed No
FAYETTE	MO 65248-9813	Region 5	Facility Number 23894
ASHBURY HEIGHTS OF FULTON			
704 WEST CHESTNUT		Telephone (573) 642-2015	Alzheimer's Unit No
FULTON	MO 65251-1254	Level of Care: RCF	Bed Capacity 12
Mailing Address 704 WEST CHESTN		County CALLAWAY	DMH Licensed No
FULTON	MO 65251-1254	Region 6	Facility Number 23923
		2109101	25,25
ASHBURY HEIGHTS OF JEFFERSO	ON CITY		
834 WEATHERED ROCK COURT		Telephone (573) 634-7402	Alzheimer's Unit No
JEFFERSON CITY	MO 65101-1824	Level of Care: RCF	Bed Capacity 12
Mailing Address 834 WEATHERED R	OCK COURT	County COLE	DMH Licensed No
JEFFERSON CITY	MO 65101-1824	Region 6	Facility Number 23936
ASHBURY HEIGHTS OF LAURIE			
299 HIGHWAY RA		Telephone (573) 374-0076	Alzheimer's Unit No
LAURIE	MO 65038-6024	Level of Care: RCF	Bed Capacity 12
Mailing Address 299 HIGHWAY RA		County MORGAN	DMH Licensed No
LAURIE	MO 65038-6024	Region 6	Facility Number 23915
			·
ASHBURY HEIGHTS OF MONTGO	MERY CITY		
625 WEST 2ND ST		Telephone (573) 564-3386	Alzheimer's Unit No
MONTGOMERY CITY	MO 63361-1762	Level of Care: RCF	Bed Capacity 12
Mailing Address 625 WEST 2ND ST		County MONTGOMERY	DMH Licensed No
MONTGOMERY CITY	MO 63361-1762	Region 6	Facility Number 20160
ASHBURY HEIGHTS OF TIPTON			
908 SOUTH PARK		Telephone (660) 433-6496	Alzheimer's Unit No
TIPTON	MO 65081-8408	Level of Care: RCF	Bed Capacity 12
Mailing Address 908 SOUTH PARK		County MONITEAU	DMH Licensed No
TIPTON	MO 65081-8408	Region 6	Facility Number 16506
		=	

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ASHLAND HEALTHCARE			TEMPORARY CLOS	URE - STAFFING	
300 SOUTH HENRY CLAY BLVD	Te	elephone	(573) 657-2877	Alzheimer's Unit	No
ASHLAND MO 6	5010-9438 Le	evel of Care:	SNF	Bed Capacity	60
Mailing Address 300 S HENRY CLAY BLVD	Co	ounty BOC	ONE	DMH Licensed	No
ASHLAND MO 6	5010-9438 Re	egion 6 M	Iedicare/Medicaid	Facility Number	17908
ACHI AND VII I A ACCICTED I IVING DV	AMEDICADE				
ASHLAND VILLA - ASSISTED LIVING BY A 301 SOUTH HENRY CLAY BLVD		lanhana	(573) 657-1920	Alahaiman'a Unit	No
		elephone evel of Care:	ALF**	Alzheimer's Unit	72
Mailing Address 301 SOUTH HENRY CLAY B				Bed Capacity DMH Licensed	No
			INE		
ASILAND MO 0.	3010-9439 Ke	egion 6		Facility Number	20303
ASHLEY MANOR CARE CENTER	m.	lanka.	(660) 992 6594	All-batanant, TT 14	N T
1630 RADIO HILL RD		elephone	(660) 882-6584	Alzheimer's Unit	No 52
		evel of Care:	SNF	Bed Capacity	52
Mailing Address 1630 RADIO HILL RD			OPER	DMH Licensed	No
BOONVILLE MO 6:	5233-1957 Re	egion 6 N	Iedicare/Medicaid	Facility Number	00216
ACIDENIALATARY					
ASPEN VALLEY			(606) 246 0624		MEG
1888 EAST 9TH STREET		elephone	(696) 346-9634	Alzheimer's Unit	YES
		evel of Care:	ALF**	Bed Capacity	14
Mailing Address 1888 EAST 9TH STREET			NKLIN	DMH Licensed	No
WASHINGTON MO 65	3090-3549 Re	egion 6		Facility Number	32779
ACRIPE CENTOR I WING ADVANCE					
ASPIRE SENIOR LIVING ADVANCE	The state of the s		(572) 702 2440	A1 1	N
315 SOUTH TILLEY ST		elephone	(573) 722-3440	Alzheimer's Unit	No
		evel of Care:	SNF	Bed Capacity	70
Mailing Address 315 S TILLEY ST		•	DDARD	DMH Licensed	No
ADVANCE MO 63	3730-7230 Re	egion 2 N	Iedicare/Medicaid	Facility Number	11722
ACRIDE CENTOR I WING EACE DRAIDIE					
ASPIRE SENIOR LIVING EAST PRAIRIE 186 MILLAR RD	To	elephone	(573) 649-3551	Alzheimer's Unit	No
		evel of Care:	SNF	Bed Capacity	70
Mailing Address PO BOX 299			SISSIPPI	DMH Licensed	No
		•		Facility Number	
EAST PRAIRIE MO 0.	3845-0299 Re	egion 2 M	Iedicare/Medicaid	racinty Number	12083
ASPIRE SENIOR LIVING EXCELSIOR SPRI	INGS				
1003 MEADOWLARK LN		elephone	(816) 630-3145	Alzheimer's Unit	No
		evel of Care:	(816) 630-3143 SNF		108
				Bed Capacity	
Mailing Address 1003 MEADOWLARK LN		ounty CLA		DMH Licensed	No
EXCELSIOR SPRINGS MO 64	4024-3304 Re	egion 4 N	Iedicare/Medicaid	Facility Number	19197
ASPIRE SENIOR LIVING FAYETTE					
501 SOUTH PARK	To	elephone	(660) 248-3371	Alzheimer's Unit	No
		evel of Care:	SNF	Bed Capacity	60
Mailing Address 501 S PARK			VARD	DMH Licensed	No
		•			
raielle MO 6	5248-8952 Re	egion 5 N	Iedicare/Medicaid	Facility Number	10870

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ACDIDE CENIOD I IVING CEDALD		TEMBOD A BY CLO	CLIDE CTATEING
ASPIRE SENIOR LIVING GERALD		TEMPORARY CLO	
533 CANAAN ROAD		Telephone (573) 764-2135	Alzheimer's Unit No
GERALD	MO 63037-2515	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 180		County FRANKLIN	DMH Licensed No
GERALD	MO 63037-0180	Region 6 Medicare/Medicaid	Facility Number 13926
ASPIRE SENIOR LIVING JONESBU	URG		
308 CEDAR AVE		Telephone (636) 488-5400	Alzheimer's Unit Yes
JONESBURG	MO 63351-1126	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 218		County MONTGOMERY	DMH Licensed No
JONESBURG	MO 63351-0218	Region 6 Medicare/Medicaid	Facility Number 13265
ASPIRE SENIOR LIVING MALDEN	I		
1209 STOKELAN	•	Telephone (573) 276-5115	Alzheimer's Unit Yes
MALDEN	MO 63863-1335	Level of Care: SNF	Bed Capacity 70
	MO 03003-1333		• •
Mailing Address 1209 STOKELAN	MO (20(2) 1225	County DUNKLIN	
MALDEN	MO 63863-1335	Region 2 Medicare/Medicaid	Facility Number 12465
ASPIRE SENIOR LIVING MOBERI	.Y		
700 EAST URBANDALE DR		Telephone (660) 263-9060	Alzheimer's Unit Yes
MOBERLY	MO 65270-1966	Level of Care: SNF	Bed Capacity 120
Mailing Address 700 EAST URBAND	ALE DR	County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-1966	Region 5 Medicare/Medicaid	Facility Number 12523
ASPIRE SENIOR LIVING OAK GRO	OVE		
2108 SOUTH MITCHELL	OVE	Telephone (816) 690-4118	Alzheimer's Unit Yes
OAK GROVE	MO 64075-9472	Level of Care: SNF	
	MO 04073-9472		
Mailing Address 2108 S MITCHELL	MO (4075 0472	County JACKSON	DMH Licensed No
OAK GROVE	MO 64075-9472	Region 3 Medicare/Medicaid	Facility Number 05849
ASPIRE SENIOR LIVING PLATTE	CITY		
220 O'ROURKE DRIVE		Telephone (816) 858-5222	Alzheimer's Unit No
PLATTE CITY	MO 64079-9360	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 1310		County PLATTE	DMH Licensed No
PLATTE CITY	MO 64079-1310	Region 4 Medicare/Medicaid	Facility Number 12655
ASSISTED LIVING AT CHARLESS	VILLAGE		
5943 TELEGRAPH RD		Telephone (314) 846-2002	Alzheimer's Unit No
SAINT LOUIS	MO 63129-4715	Level of Care: ALF**	Bed Capacity 18
Mailing Address 5943 TELEGRAPH F		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63129-4715	•	Facility Number 05586
SAINI LOUIS	WO 03127-4/13	Region 7	racinty number 05586
ASSISTED LIVING AT THE MEAD	OWLANDS		
135 MEADOWLANDS ESTATES LN		Telephone (636) 978-3600	Alzheimer's Unit Yes
O'FALLON	MO 63366-4591	Level of Care: ALF**	Bed Capacity 86
Mailing Address 135 MEADOWLANI	OS ESTATES LN	County SAINT CHARLES	DMH Licensed No
O'FALLON	MO 63366-4591	Region 5	Facility Number 26475

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AUBURN CREEK - ASSISTED LIVI	NG BY AMERICARE			
2910 BEAVER CREEK DR		Telephone (573) 651-0199	Alzheimer's Unit Ye	es
CAPE GIRARDEAU	MO 63701-1732	Level of Care: ALF	Bed Capacity 5	53
Mailing Address 2910 BEAVER CREE	EK DR	County CAPE GIRARDEAU	DMH Licensed N	lo
CAPE GIRARDEAU	MO 63701-1732	Region 2	Facility Number 1989	€2
AUBURN RIDGE LIVING CENTER				
1425 ASHBURY WAY		Telephone (573) 634-2031	Alzheimer's Unit	lо
WARDSVILLE	MO 65101-1007	Level of Care: RCF		24
Mailing Address 1425 ASHBURY WA		County COLE		lo Io
WARDSVILLE	MO 65101-1007	Region 6	Facility Number 3183	
WIRDSVIELL	NIC 03101 1007	Region	racinty Number 5165	,2
AURORA NURSING CENTER		M. I. I. (417) 270 2127	A3 3 4	
1700 SOUTH HUDSON AVE		Telephone (417) 678-2165	Alzheimer's Unit Yo	
AURORA	MO 65605-2717	Level of Care: SNF	Bed Capacity 12	
Mailing Address 1700 S HUDSON AV		County LAWRENCE		Ю
AURORA	MO 65605-2717	Region 1 Medicare/Medicaid	Facility Number 0023	34
AUTUMN OAKS CARING CENTER	1			
1310 HOVIS ST		Telephone (417) 926-5128	Alzheimer's Unit Yo	es
MOUNTAIN GROVE	MO 65711-1219	Level of Care: SNF	Bed Capacity 12	20
Mailing Address 1310 HOVIS ST		County WRIGHT	DMH Licensed	lo.
MOUNTAIN GROVE	MO 65711-1219	Region 1 Medicare/Medicaid	Facility Number 0797	70
AUTUMN PLACE RESIDENTIAL C	ARE OF JOPLIN			
2030 E ZORA ST		Telephone (417) 626-8900	Alzheimer's Unit	lо
JOPLIN	MO 64801-1170	Level of Care: RCF*	Bed Capacity 3	38
Mailing Address 2030 E ZORA ST		County JASPER	DMH Licensed N	lо
JOPLIN	MO 64801-1170	Region 1	Facility Number 2077	19
AUTUMN RIDGE RESIDENCES				
300 AUTUMN RIDGE DR		Telephone (636) 931-8400	Alzheimer's Unit	Ю
HERCULANEUM	MO 63048-1506	Level of Care: RCF*	Bed Capacity 8	31
Mailing Address 300 AUTUMN RIDG	E DR	County JEFFERSON	DMH Licensed Ye	es
HERCULANEUM	MO 63048-1506	Region 2	Facility Number 1584	15
AUTUMN VIEW GARDENS				
16219 AUTUMN VIEW TERRACE DR	8	Telephone (636) 458-5225	Alzheimer's Unit Ye	es
ELLISVILLE	MO 63011-4743	Level of Care: ALF**	Bed Capacity 15	50
Mailing Address 16219 AUTUMN VII	EW TERRACE DR	County SAINT LOUIS COUNTY	DMH Licensed N	lo
ELLISVILLE	MO 63011-4743	Region 7	Facility Number 2075	51
AUTUMN VIEW GARDENS AT SCH	HUETZ ROAD			
11210 SCHUETZ RD		Telephone (314) 993-9888	Alzheimer's Unit Yo	es
SAINT LOUIS	MO 63146-4933	Level of Care: ALF**	Bed Capacity 11	0
Mailing Address 11210 SCHUETZ RD)	County SAINT LOUIS COUNTY		Ю
SAINT LOUIS	MO 63146-4933	Region 7	Facility Number 2290)9

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AUTUMN WOODS, INC 5500 NW HOUSTON LAKE DR KANSAS CITY Mailing Address PO BOX 12008 KANSAS CITY	MO 64151-3472 MO 64152-0008	Telephone (816) 587-2263 Level of Care: RCF* County PLATTE Region 4	Alzheimer's Unit No Bed Capacity 28 DMH Licensed Yes Facility Number 10857
AVA PLACE 1000 NW 3RD ST AVA Mailing Address PO BOX 1269 AVA	MO 65608-1269 MO 65608-1269	Telephone (417) 683-6999 Level of Care: RCF* County DOUGLAS Region 1	Alzheimer's Unit No Bed Capacity 40 DMH Licensed Yes Facility Number 20718
AVALON GARDEN 4359 TAFT AVE SAINT LOUIS Mailing Address 4359 TAFT AVE SAINT LOUIS	MO 63116-1533 MO 63116-1533	Telephone (314) 752-2022 Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 77 DMH Licensed No Facility Number 00244
AVALON MEMORY CARE 5342 BUTLER HILL ROAD SAINT LOUIS Mailing Address 5342 BUTLER HILL SAINT LOUIS	MO 63128-4152 ROAD MO 63128-4152	Telephone (314) 849-2985 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Alzheimer's Unit Bed Capacity 30 DMH Licensed Facility Number 30425
BAILEY STREET RESIDENTIAL C 102 BAILEY ST FARMINGTON Mailing Address 102 BAILEY ST FARMINGTON	MO 63640-1819 MO 63640-1819	Telephone (573) 756-6374 Level of Care: RCF County SAINT FRANCOIS Region 2	Alzheimer's Unit No Bed Capacity 12 DMH Licensed Yes Facility Number 00256
BAISCH NURSING CENTER 3260 BAISCH DR DE SOTO Mailing Address 3260 BAISCH DR DE SOTO	MO 63020-5046 MO 63020-5046	Telephone (636) 586-2291 Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 61 DMH Licensed No Facility Number 00910
BAISCH NURSING CENTER 3260 BAISCH DR DE SOTO Mailing Address 3260 BAISCH DR DE SOTO	MO 63020-5046 MO 63020-5046	Telephone (636) 586-2291 Level of Care: RCF* County JEFFERSON Region 2	Alzheimer's Unit No Bed Capacity 18 DMH Licensed No Facility Number 00910
BALLWIN RIDGE HEALTH & REE 1441 CHARIC DR WILDWOOD Mailing Address 1441 CHARIC DR WILDWOOD	MO 63021-2001 MO 63021-2001	Telephone (636) 394-2522 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 66 DMH Licensed No Facility Number 17887

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BAPTIST HOME, THE			
101 RIGGS-SCOTT LN		Telephone (573) 546-7429	Alzheimer's Unit No
IRONTON	MO 63650-4338	Level of Care: ALF	Bed Capacity 56
Mailing Address PO BOX 87		County IRON	DMH Licensed No
IRONTON	MO 63650-0087	Region 2	Facility Number 00274
BAPTIST HOME, THE		m 1 1 (572) 546 7420	
101 RIGGS-SCOTT LN	MO (2(50 4220	Telephone (573) 546-7429	Alzheimer's Unit No
IRONTON	MO 63650-4338	Level of Care: ICF	Bed Capacity 53
Mailing Address PO BOX 87	NO 62650 0007	County IRON	DMH Licensed No
IRONTON	MO 63650-0087	Region 2	Facility Number 00274
BAPTIST HOME, THE			
101 RIGGS-SCOTT LN		Telephone (573) 546-7429	Alzheimer's Unit No
IRONTON	MO 63650-4338	Level of Care: SNF	Bed Capacity 3
Mailing Address PO BOX 87		County IRON	DMH Licensed No
IRONTON	MO 63650-0087	Region 2	Facility Number 00274
INOTITION .	110 03030 0007	Region 2	Tuellity Humber 00274
BAPTIST HOME, THE			
1625 WEST GARTON RD		Telephone (417) 581-2101	Alzheimer's Unit No
OZARK	MO 65721-6637	Level of Care: ALF**	Bed Capacity 30
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-1040	Region 1	Facility Number 21509
DA DEVOE MONTE ENTE			
BAPTIST HOME, THE		T-lk (660) 646 6210	Al-L-donard-Tird No.
500 BAPTIST HOME LN	MO (4(01,2072	Telephone (660) 646-6219	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3973	Level of Care: ICF	Bed Capacity 34
Mailing Address 500 BAPTIST HOME		County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3973	Region 4	Facility Number 14084
BAPTIST HOME, THE			
500 BAPTIST HOME LN		Telephone (660) 646-6219	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3973	Level of Care: ALF**	Bed Capacity 20
Mailing Address 500 BAPTIST HOMI	E LN	County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3973	Region 4	Facility Number 14084
D. DOVER WOLE WAY			
BAPTIST HOME, THE		M 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A11.4
1625 WEST GARTON RD	NO 65701 6607	Telephone (417) 581-2101	Alzheimer's Unit No
OZARK	MO 65721-6637	Level of Care: ICF	Bed Capacity 33
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-1040	Region 1	Facility Number 21509
BAPTIST HOMES OF INDEPENDE	ENCE		
17451 MEDICAL CENTER PARKWA		Telephone (816) 373-7795	Alzheimer's Unit NO
INDEPENDENCE	MO 64057-1805	Level of Care: RCF	Bed Capacity 20
Mailing Address 17451 MEDICAL CH		County JACKSON	DMH Licensed No

Region 3

Facility Number

03782

MO 64057-1805

INDEPENDENCE

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BAPTIST HOMES OF INDEPENDENCE				
17451 MEDICAL CENTER PARKWAY	Telephone	(816) 373-7795	Alzheimer's Unit	No
INDEPENDENCE MO 64057			Bed Capacity	118
Mailing Address 17451 MEDICAL CENTER PRKW	•	JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057	-1805 Region 3	Medicare/Medicaid	Facility Number	03782
BARATHAVEN ALZHEIMER'S SPECIAL CARE				
1030 BARATHAVEN DR	Telephone	(636) 329-9160	Alzheimer's Unit	Yes
DARDENNE PRAIRIE MO 63368	20,010101		Bed Capacity	66
Mailing Address 1030 BARATHAVEN DR	County	SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE MO 63368	-8606 Region 5		Facility Number	26902
DADNADAS ACDES				
BARNABAS ACRES 210 FRANKS LN	Telephone	(573) 803-8887	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701	•	` '	Bed Capacity	56
Mailing Address 210 FRANKS LN	County	CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU MO 63701	•	CAI E GIRARDEAU	Facility Number	05130
CAI E GIRARDEAU MO 03701	-0439 Region 2		Facility Number	03130
BARNABAS HOME, THE				
1301 MONROE ST	Telephone	(660) 646-5180	Alzheimer's Unit	No
CHILLICOTHE MO 64601	-1345 Level of Ca	re: RCF*	Bed Capacity	64
Mailing Address 1301 MONROE ST	County	LIVINGSTON	DMH Licensed	Yes
CHILLICOTHE MO 64601	·		Facility Number	04632
			·	
BARNABAS REDWOOD MANOR				
1194 LANDON RD	Telephone	(573) 468-8150	Alzheimer's Unit	No
BOURBON MO 65441	-8218 Level of Ca	re: RCF	Bed Capacity	47
Mailing Address 1194 LANDON RD	County	CRAWFORD	DMH Licensed	Yes
BOURBON MO 65441	-8218 Region 6		Facility Number	08609
BARNES-JEWISH EXTENDED CARE 401 CORPORATE PARK DR	Telephone	(214) 725 7447	Alzheimer's Unit	Ma
	•	(314) 725-7447		No
SAINT LOUIS MO 63105			Bed Capacity	120
Mailing Address 401 CORPORATE PARK DR SAINT LOUIS MO 63105	County	SAINT LOUIS COUNTY	DMH Licensed Facility Number	No
SAINI LOUIS MO 6510.	-4201 Region 7	Medicare/Medicaid	racmty Number	15878
BAYLESS BOARDING HOME				
3719 SAND CREEK ROAD	Telephone	(573) 747-0889	Alzheimer's Unit	No
FARMINGTON MO 63640	1-7349 Level of Ca	re: RCF	Bed Capacity	12
Mailing Address 3719 SAND CREEK RD	County	SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO 63640	-7349 Region 2		Facility Number	17300
BEACON HILL RESIDENTIAL CARE	70.1. Y	(016) 521 6160	Alabatana to TV	N.T.
2905 CAMPBELL	Telephone	(816) 531-6168	Alzheimer's Unit	No
KANSAS CITY MO 64109			Bed Capacity	37 V
Mailing Address 2905 CAMPBELL	•	JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64109	-1417 Region 3		Facility Number	00329

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DEALITIEU CAMOD HOME				
BEAUTIFUL SAVIOR HOME 1003 SOUTH CEDAR ST		Telephone (816) 331-0781	Alzheimer's Unit	No
BELTON	MO 64012-3703	Level of Care: SNF	Bed Capacity	126
Mailing Address 1003 S CEDAR ST	WIO 04012-3703	County CASS	DMH Licensed	No
BELTON	MO 64012-3703	Region 3 Medicare/Medicaid	Facility Number	00342
BELION	1410 04012-3703	Region 3 Medicare/Medicaid	Pacinty Number	00342
BEAUTIFUL SAVIOR HOME				
1003 SOUTH CEDAR ST		Telephone (816) 331-0781	Alzheimer's Unit	No
BELTON	MO 64012-3703	Level of Care: ALF	Bed Capacity	55
Mailing Address 1003 S CEDAR ST		County CASS	DMH Licensed	No
BELTON	MO 64012-3703	Region 3	Facility Number	00342
		1109.01	,	.2
BEAUVAIS REHAB AND HEALTHO	CARE CENTER			
3625 MAGNOLIA AVE		Telephone (314) 771-2990	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63110-4048	Level of Care: SNF	Bed Capacity	184
Mailing Address 3625 MAGNOLIA A	VE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63110-4048	Region 7 Medicare/Medicaid	Facility Number	09528
BELLEFONTAINE GARDENS NUR	SING & REHAB	TEMPORARY CLO	SURE - STAFFING	
9500 BELLEFONTAINE RD		Telephone (314) 388-0796	Alzheimer's Unit	No
SAINT LOUIS	MO 63137-1336	Level of Care: SNF	Bed Capacity	96
Mailing Address 9500 BELLEFONTA	INE RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63137-1336	Region 7 Medicare/Medicaid	Facility Number	02598
DELL EVIEW VALLED DV NVDGING U	VOLUE.			
BELLEVIEW VALLEY NURSING H	IOME	(572) (07 5211	A11	N
23144 HIGHWAY 32	MO (2(2)2 (24)	Telephone (573) 697-5311 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 122
BELLEVIEW			Bea Cabacity	
M-92 A JJ 22144 HICHWAY 22	MO 63623-6346			
Mailing Address 23144 HIGHWAY 32		County IRON	DMH Licensed	No
Mailing Address 23144 HIGHWAY 32 BELLEVIEW				
•	MO 63623-6346	County IRON	DMH Licensed	No
BELLEVIEW	MO 63623-6346	County IRON	DMH Licensed	No
BELOVED HEALTH AND REHABII	MO 63623-6346	County IRON Region 2 Medicare/Medicaid	DMH Licensed Facility Number	No 00382
BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL	MO 63623-6346 LITATION CENTER MO 63401-2361	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122	DMH Licensed Facility Number Alzheimer's Unit	No 00382 No
BELOVED HEALTH AND REHABIT 328 MUNGER LANE	MO 63623-6346 LITATION CENTER MO 63401-2361	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 00382 No 111
BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE	MO 63623-6346 LITATION CENTER MO 63401-2361	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 00382 No 111 No
BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 00382 No 111 No
BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 00382 No 111 No
BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00382 No 111 No 03340
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00382 No 111 No 03340
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927 Level of Care: RCF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 00382 No 111 No 03340
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER MO 63110-4009	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 00382 No 111 No 03340 No 15 Yes
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS BENTLEYS EXTENDED CARE	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER MO 63110-4009	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00382 No 111 No 03340 No 15 Yes 21163
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS BENTLEYS EXTENDED CARE 3060 ASHBY ROAD	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER MO 63110-4009 MO 63110-4009	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7 Telephone (314) 426-0433	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00382 No 111 No 03340 No 15 Yes 21163
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS BENTLEYS EXTENDED CARE 3060 ASHBY ROAD OVERLAND	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER MO 63110-4009	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7 Telephone (314) 426-0433 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00382 No 111 No 03340 No 15 Yes 21163
BELLEVIEW BELOVED HEALTH AND REHABIT 328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS BENTLEYS EXTENDED CARE 3060 ASHBY ROAD	MO 63623-6346 LITATION CENTER MO 63401-2361 MO 63401-2361 ER MO 63110-4009 MO 63110-4009	County IRON Region 2 Medicare/Medicaid Telephone (573) 221-9122 Level of Care: SNF County MARION Region 5 Medicare/Medicaid Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7 Telephone (314) 426-0433	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 00382 No 111 No 03340 No 15 Yes 21163

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BENTON HOUSE OF BLUE SPRINGS			
1701 NW JEFFERSON ST	Telephone (816) 224-2727	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64015-7229	Level of Care: ALF**	Bed Capacity	95
Mailing Address 1701 NW JEFFERSON ST	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64015-7229	Region 3	Facility Number	29729
BENTON HOUSE OF RAYMORE			
2100 JOHNSTON DR	Telephone (816) 322-2111	Alzheimer's Unit	Yes
RAYMORE MO 64083-8122	Level of Care: ALF**	Bed Capacity	95
Mailing Address 2100 JOHNSTON DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-8122	Region 3	Facility Number	29896
BENTON HOUSE OF STALEY HILLS			
11071 N WOODLAND AVE	Telephone (816) 372-1888	Alzheimer's Unit	Yes
KANSAS CITY MO 64155-1552	Level of Care: ALF**	Bed Capacity	80
Mailing Address 11071 N WOODLAND AVE	County CLAY	DMH Licensed	No
KANSAS CITY MO 64155-1552	Region 4	Facility Number	30774
	ū		
BENTON HOUSE OF TIFFANY SPRINGS			
5901 NW 88TH ST	Telephone (816) 505-4555	Alzheimer's Unit	Yes
KANSAS CITY MO 64154-1607	Level of Care: ALF**	Bed Capacity	80
Mailing Address 5901 NW 88TH ST	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64154-1607	Region 4	Facility Number	29519
112 (0.12 1.130)	Region .	ruemty rumber	2)31)
BENTWOOD NURSING & REHAB			
1501 CHARBONIER RD	Telephone (314) 921-2700	Alzheimer's Unit	No
FLORISSANT MO 63031-5308	Level of Care: SNF	Bed Capacity	116
Mailing Address 1501 CHARBONIER RD	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 63031-5308	Region 7 Medicare/Medicaid	Facility Number	14817
TEORISSANT MO 03031-3300	Region / Medicare/Medicard	racinty Number	1401/
BERNARD CARE CENTER			
4335 WEST PINE BLVD	Telephone (314) 371-0200	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2205	Level of Care: SNF	Bed Capacity	141
Mailing Address 4335 WEST PINE BLVD	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63108-2205	Region 7 Medicare/Medicaid	Facility Number	00436
SAINT LOUIS MO 03100-2203	Region / Medicare/Medicaid	racinty Number	00430
DEDTO AND MUDGING AND DEHAD CENTED			
BERTRAND NURSING AND REHAB CENTER 603 WEST HIGHWAY 62	Telephone (573) 683-4290	Alaboimonia Tinit	No
		Alzheimer's Unit	No
BERTRAND MO 63823-9738	Level of Care: SNF	Bed Capacity	60
Mailing Address 603 WEST HIGHWAY 62	County MISSISSIPPI	DMH Licensed	No
BERTRAND MO 63823-9738	Region 2 Medicare/Medicaid	Facility Number	00440
DETEN HAVEN MITDOING HOME			
BETH HAVEN NURSING HOME 2500 PLEASANT ST	Telephone (573) 221-6000	Alzheimer's Unit	Yes
HANNIBAL MO 63401-2600	Level of Care: SNF	Bed Capacity	105
Mailing Address 2500 PLEASANT ST	County MARION	DMH Licensed	No
HANNIBAL MO 63401-2600	Region 5 Medicare/Medicaid	Facility Number	00469
11/11/11/11/11/11/11/11/11/11/11/11/11/	Region 5 Medicare/Medicald	racinty Muniper	00409

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BETHESDA DILWORTH				
9645 BIG BEND BLVD		Telephone (314) 968-5460	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63122-6521	Level of Care: SNF	Bed Capacity	400
Mailing Address 9645 BIG BEND BLV		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63122-6521	Region 7 Medicare/Medicaid	Facility Number	00508
51m (1 250m)	00122 0021	region / Medicare/Medicard	I deliley I (dilloci	00500
BETHESDA HAWTHORNE PLACE				
1111 SOUTH BERRY ROAD		Telephone (314) 942-5750	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63122-6598	• '		66
			Bed Capacity DMH Licensed	
Mailing Address 1111 SOUTH BERRY		County SAINT LOUIS COUNTY		No
SAINT LOUIS	MO 63122-6598	Region 7	Facility Number	30509
BETHESDA MEADOW				
322 OLD STATE ROAD		Telephone (636) 227-3431	Alzheimer's Unit	Yes
ELLISVILLE	MO 63021-5917	Level of Care: SNF	Bed Capacity	210
Mailing Address 322 OLD STATE ROA		County SAINT LOUIS COUNTY	DMH Licensed	No No
ELLISVILLE	MO 63021-5917	*		
ELLISVILLE	MO 03021-3917	Region 7 Medicare/Medicaid	Facility Number	15226
BETHESDA SOUTHGATE				
5943 TELEGRAPH RD		Telephone (314) 846-2000	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63129-4715	Level of Care: SNF	Bed Capacity	192
Mailing Address 5943 TELEGRAPH RI		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63129-4715	Region 7 Medicare/Medicaid	Facility Number	05586
SAIR LOOK	110 03127 4713	Region / Wedicare/Medicard	racinty Number	03380
BIG BEND RETREAT				
620 NORTH EMMERSON		Telephone (660) 529-2237	Alzheimer's Unit	No
SLATER	MO 65349-1157	Level of Care: ICF	Bed Capacity	60
Mailing Address 620 NORTH EMMER	SON	County SALINE	DMH Licensed	No
SLATER	MO 65349-1157	Region 5	Facility Number	00546
BIG BEND RETREAT				
620 NORTH EMMERSON		Telephone (660) 529-2237	Alzheimer's Unit	No
SLATER	MO 65349-1157	Level of Care: RCF*	Bed Capacity	10
Mailing Address 620 NORTH EMMER		County SALINE	DMH Licensed	No
SLATER	MO 65349-1157	Region 5	Facility Number	00546
BIG BEND WOODS HEALTHCARE	CENTER			
110 HIGHLAND AVE	CENTER	Telephone (636) 529-8300	Alzheimer's Unit	No
VALLEY PARK	MO 63088-1422	Level of Care: SNF	Bed Capacity	135
Mailing Address 110 HIGHLAND AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
VALLEY PARK	MO 63088-1422		Facility Number	01170
VALLET FARK	1VIO UJU00-1422	Region 7 Medicare/Medicaid	Facility Number	011/0
BIG PRAIRIE ASSISTED LIVING, LI	LC			
411 NORTH KINGSHIGHWAY		Telephone (573) 471-5503	Alzheimer's Unit	No
SIKESTON	MO 63801-	Level of Care: ALF	Bed Capacity	36
Mailing Address PO BOX 909		County SCOTT	DMH Licensed	Yes

Region 2

Facility Number

03229

MO 63801-0909

SIKESTON

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BIG RIVER NURSING & REHAB		
6400 THE CEDARS COURT	Telephone (636) 274-1777 Alzheimer's Unit Yes	,
CEDAR HILL MO 63016-2220	Level of Care: SNF Bed Capacity 150)
Mailing Address 6400 THE CEDARS CT	County JEFFERSON DMH Licensed No.)
CEDAR HILL MO 63016-2220	Region 2 Medicare/Medicaid Facility Number 12647	!
BIG SPRING CARE CENTER FOR REHAB AND HEALT	THCARE	
202 EAST MILL ST	Telephone (417) 754-8711 Alzheimer's Unit No)
HUMANSVILLE MO 65674-8507	Level of Care: SNF Bed Capacity 60)
Mailing Address 202 EAST MILL ST	County POLK DMH Licensed No	
HUMANSVILLE MO 65674-8507	Region 1 Medicare/Medicaid Facility Number 18672	
	region 1 Medical difficulture 2 menting 1 ment	
BIRCH POINTE HEALTH AND REHABILITATION		
3705 S JEFFERSON AVE	Telephone (417) 889-0773 Alzheimer's Unit Yes	,
SPRINGFIELD MO 65807-5880	Level of Care: SNF Bed Capacity 120	
	• •	
Mailing Address 3705 S JEFFERSON AVE	•	
SPRINGFIELD MO 65807-5880	Region 1 Medicare/Medicaid Facility Number 31013	
DICHOD CREMCED DI ACE TAG THE		
BISHOP SPENCER PLACE, INC, THE	The second of th	
4301 MADISON AVE	Telephone (816) 931-4277 Alzheimer's Unit No	
KANSAS CITY MO 64111-3491	Level of Care: ALF** Bed Capacity 40	
Mailing Address 4301 MADISON AVE	County JACKSON DMH Licensed No	
KANSAS CITY MO 64111-3491	Region 3 Facility Number 20635	1
BISHOP SPENCER PLACE, INC, THE		
4301 MADISON AVE	Telephone (816) 931-4277 Alzheimer's Unit No	
KANSAS CITY MO 64111-3491	•	
	1 .	
Mailing Address 4301 MADISON AVE	County JACKSON DMH Licensed No	
KANSAS CITY MO 64111-3491	Region 3 Medicare/Medicaid Facility Number 20635	
BLESSED HOMES		
305 E 63RD ST	Telephone (816) 678-8061 Alzheimer's Unit No	
KANSAS CITY MO 64113-2225	Level of Care: RCF Bed Capacity 11	
Mailing Address 305 E 63RD ST KANSAS CITY MO 64113-2225	·	
KANSAS CITT WIO 04113-2223	Region 3 Facility Number 27175	
BLESSING CENTER, THE		
302 NORTH MAIN	Telephone (660) 397-2293 Alzheimer's Unit No)
EDINA MO 63537-1353	Level of Care: RCF Bed Capacity 51	
Mailing Address 302 NORTH MAIN	County KNOX DMH Licensed Yes	
	•	
EDINA MO 63537-1353	Region 5 Facility Number 03728	1
BLOOMFIELD LIVING CENTER	TEMPORARY CLOSURE - STAFFING	
606 WEST MISSOURI ST	Telephone (573) 568-2137 Alzheimer's Unit No)
BLOOMFIELD MO 63825-9706	Level of Care: SNF Bed Capacity 60	
Mailing Address 606 WEST MISSOURI ST	County STODDARD DMH Licensed No	
BLOOMFIELD MO 63825-9706	Region 2 Medicare/Medicaid Facility Number 00629	
DECOMI ILLD 1910 03023-9700	Region 2 Medical e/Medicald Pacinty Funited 00029	

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DI HE CACTLE LI C			
BLUE CASTLE LLC 1830 E LAVERNE ST	Telephone (417) 777-2583	Alzheimer's Unit	No
BOLIVAR MO 65613-1488	Level of Care: RCF*	Bed Capacity	30
Mailing Address 1830 E LAVERNE ST	County POLK	DMH Licensed	Yes
BOLIVAR MO 65613-1488	Region 1	Facility Number	24698
BOLIVAR NIO 03013-1400	Kegion 1	Facility Number	24098
BLUE CIRCLE REHAB AND NURSING			
2939 MAGAZINE STREET	Telephone (314) 531-0500	Alzheimer's Unit	No
SAINT LOUIS MO 63106-1245	Level of Care: SNF	Bed Capacity	90
Mailing Address 2939 MAGAZINE STREET	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63106-1245	Region 7 Medicare/Medicaid	Facility Number	15258
Mo 63100 1210	region / Wedicare/Wedicard	racinty runner	13230
BLUE HILLS REST HOME, INC			
2207 NORTH BLUE MILLS RD	Telephone (816) 796-3376	Alzheimer's Unit	No
INDEPENDENCE MO 64058-2022	Level of Care: ALF**	Bed Capacity	63
Mailing Address 2207 N BLUE MILLS RD	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64058-2022	Region 3	Facility Number	11146
	<u> </u>		
BLUEGRASS TERRACE			
102 REDTAIL DR	Telephone (573) 657-0899	Alzheimer's Unit	No
ASHLAND MO 65010-1179	Level of Care: RCF	Bed Capacity	16
Mailing Address 102 REDTAIL DR	County BOONE	DMH Licensed	No
ASHLAND MO 65010-1179	Region 6	Facility Number	25731
DAVIDE OPERAL MEDDA OF A CONCERN A MANAGE DAVIDAGE DAVIDAGE DE			
BLUFF CREEK TERRACE - ASSISTED LIVING BY AMERICARE	W. J. J. (200) 047 0444		
3104 BLUFF CREEK DR	Telephone (573) 815-9111	Alzheimer's Unit	Yes
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524	Level of Care: ALF**	Bed Capacity	48
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR	Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed	48 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524	Level of Care: ALF**	Bed Capacity	48
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524	Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed	48 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE	Level of Care: ALF** County BOONE Region 6	Bed Capacity DMH Licensed Facility Number	48 No 20625
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	48 No 20625 Yes
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No
3104 BLUFF CREEK DR COLUMBIA Mo 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No
3104 BLUFF CREEK DR COLUMBIA Moiling Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No 00754 No 40 Yes
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7 Telephone (417) 327-5790	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 65114-3328 BOLIVAR MANOR HOUSE 404 EAST BROADWAY BOLIVAR MANOR HOUSE	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7 Telephone (417) 327-5790 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529 BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328 Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6 Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7 Telephone (417) 327-5790	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709

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BOULEVARD SENIOR LIVING OF	ST CHARLES			
3340 EHLMANN ROAD		Telephone (636) 757-5077	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63301-4087	Level of Care: ALF**	Bed Capacity	128
Mailing Address 3340 EHLMANN RO	AD	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-4087	Region 5	Facility Number	31029
BOULEVARD SENIOR LIVING OF	WENTZVII I E			
120 PERRY CATE BOULEVARD	WENTEVIERE	Telephone (636) 698-9458	Alzheimer's Unit	Yes
WENTZVILLE	MO 63385-4719	Level of Care: ALF**	Bed Capacity	62
Mailing Address 120 PERRY CATE B		County SAINT CHARLES	DMH Licensed	No
WENTZVILLE	MO 63385-4719	Region 5	Facility Number	31404
WENTE VEEL	110 03303 1719	Region 5	racinty runiber	31404
BOWLING GREEN RESIDENTIAL	CARE			
119 WEST CENTENNIAL AVE		Telephone (573) 324-5560	Alzheimer's Unit	No
BOWLING GREEN	MO 63334-1605	Level of Care: RCF*	Bed Capacity	25
Mailing Address 119 WEST CENTEN		County PIKE	DMH Licensed	Yes
BOWLING GREEN	MO 63334-1605	Region 5	Facility Number	07712
BRADFORD COURT - ASSISTED LI	IVING BY AMERICARE			
902 NORTH MAIN		Telephone (417) 725-0177	Alzheimer's Unit	No
NIXA	MO 65714-9384	Level of Care: ALF**	Bed Capacity	50
Mailing Address 902 NORTH MAIN		County CHRISTIAN	DMH Licensed	No
NIXA	MO 65714-9384	Region 1	Facility Number	17732
DDENIT D TINININ MANOD				
BRENT B TINNIN MANOR 220 EUEL POLK DR		Telephone (573) 663-2545	Alzheimer's Unit	No
ELLINGTON	MO 63638-7967	Level of Care: SNF	Bed Capacity	60
Mailing Address 220 EUEL POLK DR	WIO 03038-7907	County REYNOLDS	DMH Licensed	No
ELLINGTON	MO 63638-7967	Region 2 Medicare/Medicaid	Facility Number	08027
LELINGTON	WIO 03030-7707	Region 2 Medicare/Medicard	racinty rumber	08027
BRENTMOOR RETIREMENT COM	MUNITY			
8600 DELMAR BLVD		Telephone (314) 995-3811	Alzheimer's Unit	No
SAINT LOUIS	MO 63124-1973	Level of Care: ALF**	Bed Capacity	36
Mailing Address 8600 DELMAR BLV	D	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS				
SAINT LOUIS	MO 63124-1973	Region 7	Facility Number	19968
SAINI LOUIS	MO 63124-1973	Region 7	Facility Number	19968
BRIDGEWAY RESIDENTIAL CARE		Region 7	Facility Number	19968
			Facility Number Alzheimer's Unit	19968 No
BRIDGEWAY RESIDENTIAL CARE			Alzheimer's Unit	
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON	E FACILITY	Telephone (573) 642-7770		No
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST	E FACILITY	Telephone (573) 642-7770 Level of Care: RCF*	Alzheimer's Unit Bed Capacity	No 94
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON Mailing Address 828 JEFFERSON ST	E FACILITY MO 65251-1877	Telephone (573) 642-7770 Level of Care: RCF* County CALLAWAY	Alzheimer's Unit Bed Capacity DMH Licensed	No 94 Yes
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON Mailing Address 828 JEFFERSON ST FULTON	E FACILITY MO 65251-1877 MO 65251-1877	Telephone (573) 642-7770 Level of Care: RCF* County CALLAWAY	Alzheimer's Unit Bed Capacity DMH Licensed	No 94 Yes
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON Mailing Address 828 JEFFERSON ST FULTON BRIDGEWOOD HEALTH CARE CE	E FACILITY MO 65251-1877 MO 65251-1877	Telephone (573) 642-7770 Level of Care: RCF* County CALLAWAY Region 6	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 94 Yes 13522
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON Mailing Address 828 JEFFERSON ST FULTON BRIDGEWOOD HEALTH CARE CE 11515 TROOST	MO 65251-1877 MO 65251-1877 MO 65251-1877	Telephone (573) 642-7770 Level of Care: RCF* County CALLAWAY Region 6 Telephone (816) 943-0101	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	No 94 Yes 13522
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON Mailing Address 828 JEFFERSON ST FULTON BRIDGEWOOD HEALTH CARE CE 11515 TROOST KANSAS CITY	E FACILITY MO 65251-1877 MO 65251-1877	Telephone (573) 642-7770 Level of Care: RCF* County CALLAWAY Region 6 Telephone (816) 943-0101 Level of Care: SNF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 94 Yes 13522 Yes 166
BRIDGEWAY RESIDENTIAL CARE 828 JEFFERSON ST FULTON Mailing Address 828 JEFFERSON ST FULTON BRIDGEWOOD HEALTH CARE CE 11515 TROOST	MO 65251-1877 MO 65251-1877 MO 65251-1877	Telephone (573) 642-7770 Level of Care: RCF* County CALLAWAY Region 6 Telephone (816) 943-0101	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	No 94 Yes 13522

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BRISTOL MANOR OF AURORA		m. 1		
740 SOUTH HUDSON	MO 65605 2512	Telephone (417) 678-7535	Alzheimer's Unit	No
AURORA	MO 65605-2512	Level of Care: RCF	Bed Capacity	12 N-
Mailing Address 740 SOUTH HUDSO: AURORA	MO 65605-2512	County LAWRENCE	DMH Licensed	No
AURORA	MO 03003-2312	Region 1	Facility Number 20)352
BRISTOL MANOR OF BETHANY				
811 SOUTH 24TH ST		Telephone (660) 425-7133	Alzheimer's Unit	No
BETHANY	MO 64424-2631	Level of Care: RCF	Bed Capacity	12
Mailing Address 811 SOUTH 24TH ST		County HARRISON	DMH Licensed	No
BETHANY	MO 64424-2631	Region 4		9068
BRISTOL MANOR OF BOOMWILL	,			
BRISTOL MANOR OF BOONVILLE 1290 ASHLEY RD		Telephone (660) 882-3393	Alzheimer's Unit	No
BOONVILLE	MO 65233-2108	Level of Care: RCF	Bed Capacity	12
Mailing Address 1290 ASHLEY RD	WIO 03233-2100	County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2108	Region 6		7310
		Region 5		.510
BRISTOL MANOR OF BROOKFIEL	.D			
338 THOMPSON		Telephone (660) 258-5065	Alzheimer's Unit	No
BROOKFIELD	MO 64628-2419	Level of Care: RCF	Bed Capacity	12
Mailing Address 338 THOMPSON		County LINN	DMH Licensed	No
BROOKFIELD	MO 64628-2419	Region 5	Facility Number 18	3666
BRISTOL MANOR OF BUFFALO		T. 1. 1. (417) 245 5500	43.3.4.4.77.4	
1002 SOUTH BIRCH	MO (5/02 0455	Telephone (417) 345-5500	Alzheimer's Unit	No
BUFFALO Mailing Address 1002 SOUTH BIRCH	MO 65622-9455	Level of Care: RCF County DALLAS	Bed Capacity DMH Licensed	12 No
Mailing Address 1002 SOUTH BIRCH BUFFALO	MO 65622-9455	•		
BUTTALO	MO 03022-9433	Region 1	Facility Number 18	3142
BRISTOL MANOR OF BUTLER				
411 SOUTH DELAWARE		Telephone (660) 679-3661	Alzheimer's Unit	No
BUTLER	MO 64730-2311	Level of Care: RCF	Bed Capacity	12
Mailing Address 411 S DELAWARE		County BATES	DMH Licensed	No
BUTLER	MO 64730-2311	Region 3	Facility Number 18	3817
DDICTOL MANOD OF CALLEONY				
BRISTOL MANOR OF CALIFORNIA	A	Tolonhous (572) 706 4242	Alabaimania II	Nο
605 PARKVIEW DR CALIFORNIA	MO 65018-2001	Telephone (573) 796-4342 Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 12
Mailing Address 605 PARKVIEW DR	1VIO UJU10-2UU1	County MONITEAU	DMH Licensed	No
		County MONITEAU		7401
•	MO 65018-2001	Region 6		+01
CALIFORNIA	MO 65018-2001	Region 6	Facility Number 17	
•		Region 6	Facility Number 1	
CALIFORNIA		Region 6 Telephone (573) 346-6800	Alzheimer's Unit	No
CALIFORNIA BRISTOL MANOR OF CAMDENTO		Ü		No 12
CALIFORNIA BRISTOL MANOR OF CAMDENTO 75 FOURTH ST	N	Telephone (573) 346-6800	Alzheimer's Unit	

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DDICTOL MANOD OF CAMEDON			
BRISTOL MANOR OF CAMERON 920 NORTH HARRIS		Telephone (816) 632-6133	Alzheimer's Unit No
CAMERON	MO 64429-1145	Level of Care: RCF	Bed Capacity 12
Mailing Address 920 NORTH HARRIS	140 04429-1143	County DEKALB	DMH Licensed No
CAMERON	MO 64429-1145		Facility Number 18295
CAMERON	WO 04429-1143	Region 4	Facility Number 18295
BRISTOL MANOR OF CARROLLTO	N		
1016 EAST 10TH ST		Telephone (660) 542-2349	Alzheimer's Unit No
CARROLLTON	MO 64633-9348	Level of Care: RCF	Bed Capacity 12
Mailing Address 1016 EAST 10TH ST		County CARROLL	DMH Licensed No
CARROLLTON	MO 64633-9348	Region 4	Facility Number 18316
BRISTOL MANOR OF CARTHAGE			
2131 SOUTH RIVER AVE		Telephone (417) 358-9788	Alzheimer's Unit No
CARTHAGE	MO 64836-3350	Level of Care: RCF	Bed Capacity 12
Mailing Address 2131 S RIVER AVE	110 04030 3330	County JASPER	DMH Licensed Yes
CARTHAGE	MO 64836-3350	Region 1	Facility Number 20858
CHRITINGE	110 04030 3330	Region 1	racinty Number 20036
BRISTOL MANOR OF CENTRALIA			
610 NORTH JEFFERSON ST		Telephone (573) 682-5913	Alzheimer's Unit No
CENTRALIA	MO 65240-1178	Level of Care: RCF	Bed Capacity 12
Mailing Address 610 NORTH JEFFERS	ON ST	County BOONE	DMH Licensed No
CENTRALIA	MO 65240-1178	Region 6	Facility Number 18286
BRISTOL MANOR OF CLINTON			
1402 EAST FRANKLIN		Telephone (660) 885-8391	Alzheimer's Unit No
CLINTON	MO 64735-1768	Level of Care: RCF	Bed Capacity 12
Mailing Address 1402 EAST FRANKLII		County HENRY	DMH Licensed No
CLINTON	MO 64735-1768	Region 1	Facility Number 16656
BRISTOL MANOR OF ELDON			
1201 EAST NORTH ST		Telephone (573) 392-1200	Alzheimer's Unit No
ELDON	MO 65026-2651	Level of Care: RCF	Bed Capacity 12
Mailing Address 1201 EAST NORTH S'		County MILLER	DMH Licensed No
ELDON	MO 65026-2651	Region 6	Facility Number 17701
BRISTOL MANOR OF ELSBERRY			
1402 RIVERVIEW DR		Telephone (573) 898-5955	Alzheimer's Unit No
ELSBERRY	MO 63343-1612	Level of Care: RCF	Bed Capacity 12
Mailing Address 1402 RIVERVIEW DR		County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-1612	Region 5	Facility Number 20015
BRISTOL MANOR OF FULTON			
750 SIGN PAINTER ROAD		Telephone (573) 642-7557	Alzheimer's Unit No
FULTON	MO 65251-2514	Level of Care: RCF	Bed Capacity 12
Mailing Address 750 SIGN PAINTER R		County CALLAWAY	DMH Licensed No
FULTON	MO 65251-2514	Region 6	Facility Number 18575
. CDIOIT	00201 2017	region o	- ucing 1 dinoci 100/0

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BRISTOL MANOR OF HOLDEN			
501 WEST SECOND		Telephone (816) 732-6789	Alzheimer's Unit No
	MO 64040-1205	Level of Care: RCF	Bed Capacity 12
Mailing Address 501 WEST SECOND		County JOHNSON	DMH Licensed No
HOLDEN	MO 64040-1205	Region 3	Facility Number 17951
BRISTOL MANOR OF JEFFERSON O	TTV		
510 KENSINGTON PARK	.111	Telephone (573) 761-5772	Alzheimer's Unit No
	MO 65109-6247	Level of Care: RCF	Bed Capacity 12
Mailing Address 510 KENSINGTON PA		County COLE	DMH Licensed No
	MO 65109-6247	Region 6	Facility Number 20116
JEHLEKSON CH I	WIO 03107-0247	Region 0	racinty Number 20110
BRISTOL MANOR OF LAMAR			
603 EAST 17TH ST		Telephone (417) 682-6762	Alzheimer's Unit No
LAMAR	MO 64759-2303	Level of Care: RCF	Bed Capacity 12
Mailing Address 603 EAST 17TH ST		County BARTON	DMH Licensed No
LAMAR	MO 64759-2303	Region 1	Facility Number 18951
BRISTOL MANOR OF LEXINGTON			
2615 MAIN ST		Telephone (660) 259-6655	Alzheimer's Unit No
	MO 64067-1974	Level of Care: RCF	Bed Capacity 12
Mailing Address 2615 MAIN ST	WO 04007-1974	County LAFAYETTE	DMH Licensed No
o .	MO 64067-1974		
LEARNOTON	MO 04007-1974	Region 3	Facility Number 17543
BRISTOL MANOR OF LINCOLN			
204 SOUTH HIGHWAY 65		Telephone (660) 547-2580	Alzheimer's Unit No
LINCOLN	MO 65338-2587	Level of Care: RCF	Bed Capacity 12
Mailing Address 204 SOUTH HIGHWAY	Y 65	County BENTON	DMH Licensed No
LINCOLN	MO 65338-2587	Region 6	Facility Number 18092
BRISTOL MANOR OF MACON			
707 RANCHLAND DR		Telephone (660) 385-3020	Alzheimer's Unit No
MACON	MO 63552-1994	Level of Care: RCF	Bed Capacity 12
Mailing Address 707 RANCHLAND DR		County MACON	DMH Licensed No
MACON	MO 63552-1994	Region 5	Facility Number 17865
BRISTOL MANOR OF MARCELINE			
102 EAST HAYDEN		Telephone (660) 376-2210	Alzheimer's Unit No
	MO 64658-2003	Level of Care: RCF	Bed Capacity 12
Mailing Address 102 EAST HAYDEN	110 01030 2003	County LINN	DMH Licensed No
_	MO 64658-2003	Region 5	Facility Number 17764
WARCELINE	040J0-200J	regiuli 3	racinty runner 1//04
BRISTOL MANOR OF MARYVILLE			
323 EAST SUMMIT DR		Telephone (660) 582-4131	Alzheimer's Unit No
	MO 64468-3619	Level of Care: RCF	Bed Capacity 12
Mailing Address 323 EAST SUMMIT DI	R	County NODAWAY	DMH Licensed No
MARYVILLE	MO 64468-3619	Region 4	Facility Number 19843

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	mv.		
BRISTOL MANOR OF MONROE CI 1017 EAST LAWN ST	TY	Tolophono (572) 725 2069	Alzheimer's Unit No
MONROE CITY	MO 63456-1433	Telephone (573) 735-3068 Level of Care: RCF	Bed Capacity 12
Mailing Address 1017 EAST LAWN ST		County MONROE	DMH Licensed Yes
MONROE CITY	MO 63456-1433	Region 5	Facility Number 20045
MONKOL CITT	110 03430-1433	Kegion 5	racinty Number 20043
BRISTOL MANOR OF NEVADA			
401 EAST WALNUT		Telephone (417) 667-5700	Alzheimer's Unit No
NEVADA	MO 64772-2457	Level of Care: RCF	Bed Capacity 12
Mailing Address 401 EAST WALNUT		County VERNON	DMH Licensed Yes
NEVADA	MO 64772-2457	Region 1	Facility Number 18471
BRISTOL MANOR OF OAK GROVE 300 NORTH AUSTIN		Telephone (816) 625-8691	Alzheimer's Unit No
OAK GROVE	MO 64075-8109	Level of Care: RCF	Bed Capacity 12
Mailing Address 300 N AUSTIN	WIO 04073-8109	County JACKSON	DMH Licensed No
OAK GROVE	MO 64075-8109	Region 3	Facility Number 16552
OAK GROVE	WO 04073-0107	Kegion 5	racinty Number 10332
BRISTOL MANOR OF ODESSA			
115 SOUTH 5TH ST		Telephone (816) 633-8692	Alzheimer's Unit No
ODESSA	MO 64076-1330	Level of Care: RCF	Bed Capacity 12
Mailing Address 115 S 5TH ST		County LAFAYETTE	DMH Licensed No
ODESSA	MO 64076-1330	Region 3	Facility Number 16547
			•
BRISTOL MANOR OF PACIFIC			
2049 ROSE LN		Telephone (636) 257-8020	Alzheimer's Unit No
PACIFIC	MO 63069-1165	Level of Care: RCF	Bed Capacity 12
Mailing Address 2049 ROSE LN	100 500 50 11 57	County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1165	Region 6	Facility Number 20237
BRISTOL MANOR OF PALMYRA			
1815 SOUTH MAIN		Telephone (573) 769-2127	Alzheimer's Unit No
PALMYRA	MO 63461-1961	Level of Care: RCF	Bed Capacity 12
Mailing Address 1815 SOUTH MAIN		County MARION	DMH Licensed No
PALMYRA	MO 63461-1961	Region 5	Facility Number 20260
BRISTOL MANOR OF PLEASANT I	HILL		
2124 HIGHRIDGE		Telephone (816) 987-2562	Alzheimer's Unit No
PLEASANT HILL	MO 64080-1912	Level of Care: RCF	Bed Capacity 12
Mailing Address 2124 HIGHRIDGE		County CASS	DMH Licensed No
PLEASANT HILL	MO 64080-1912	Region 3	Facility Number 16538
BRISTOL MANOR OF PRINCETON	ſ		
200 NORTH FULLERTON		Telephone (660) 748-4354	Alzheimer's Unit No
PRINCETON	MO 64673-1176	Level of Care: RCF	Bed Capacity 12
Mailing Address 200 N FULLERTON		County MERCER	DMH Licensed No
PRINCETON	MO 64673-1176	Region 4	Facility Number 18846
		o -	

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PRICEOU MANOR OF PANAGOR					
BRISTOL MANOR OF RAYMORE 604 EAST SUNRISE DR		Telephone	(816) 322-6782	Alzheimer's Unit	No
	4083-9037	Level of Care:	RCF	Bed Capacity	12
Mailing Address 604 EAST SUNRISE DR	4063-9037	County CAS		DMH Licensed	No
e e e e e e e e e e e e e e e e e e e	4083-9037	Region 3		Facility Number	19730
MITMORE 1120 U-	4003 7037	Region 5		racinty Number	17730
BRISTOL MANOR OF REPUBLIC					
634 EAST HIGHWAY 174		Telephone	(417) 732-8998	Alzheimer's Unit	No
REPUBLIC MO 65	5738-1124	Level of Care:	RCF	Bed Capacity	12
Mailing Address 634 EAST HWY 174		County GRE	EENE	DMH Licensed	No
	5738-1124	Region 1		Facility Number	20841
BRISTOL MANOR OF SALISBURY					
102 NORTH WILLIE ST		Telephone	(660) 388-5728	Alzheimer's Unit	No
SALISBURY MO 65	5281-1458	Level of Care:	RCF	Bed Capacity	12
Mailing Address 102 NORTH WILLIE ST		County CHA	ARITON	DMH Licensed	No
SALISBURY MO 65	5281-1458	Region 5		Facility Number	18325
PRICEOU MANOR OF CERTAIN					
BRISTOL MANOR OF SEDALIA		m 1 1	(((0) 927 2029	A11.	NI-
1208 EAST 24TH ST	5201 9221	Telephone	(660) 827-2028	Alzheimer's Unit	No
	5301-8231	Level of Care:	RCF	Bed Capacity	12 No
Mailing Address 1208 EAST 24TH ST SEDALIA MO 65	5301-8231	County PET	115	DMH Licensed	
SEDALIA MO 6.	3301-8231	Region 6		Facility Number	15808
BRISTOL MANOR OF SMITHVILLE					
1502 SOUTH COMMERCIAL		Telephone	(816) 532-4490	Alzheimer's Unit	No
SMITHVILLE MO 64	4089-8474	Level of Care:	RCF	Bed Capacity	12
Mailing Address 1502 S COMMERCIAL		County CLA	ΛY	DMH Licensed	No
SMITHVILLE MO 64	4089-8474	Region 4		Facility Number	17515
BRISTOL MANOR OF STOVER					
607 WEST 4TH ST		Telephone	(573) 377-4519	Alzheimer's Unit	No
	5078-0807	Level of Care:	RCF	Bed Capacity	12
Mailing Address 607 WEST 4TH ST	3070 0007		RGAN	DMH Licensed	No
	5078-0807	Region 6	KOZII V	Facility Number	18863
		-			
BRISTOL MANOR OF TRENTON					
1701 EAST 28TH ST		Telephone	(660) 359-5599	Alzheimer's Unit	No
TRENTON MO 64	4683-1177	Level of Care:	RCF	Bed Capacity	12
Mailing Address 1701 EAST 28TH ST		County GRU	JNDY	DMH Licensed	No
TRENTON MO 64	4683-1177	Region 4		Facility Number	18597
BRISTOL MANOR OF UNIONVILLE					
715 NORTH 22ND ST, HWY 5 NORTH		Telephone	(660) 947-2151	Alzheimer's Unit	No
	3565-1142	Level of Care:	RCF	Bed Capacity	12
Mailing Address 715 NORTH 22ND ST, HWY 5			NAM	DMH Licensed	No
_	3565-1142	Region 5		Facility Number	19153
		. 0		•	

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BRISTOL MANOR OF WARRENSB	URG		
603 CREACH		Telephone (660) 747-8319	Alzheimer's Unit No
WARRENSBURG	MO 64093-1994	Level of Care: RCF	Bed Capacity 12
Mailing Address 603 CREACH		County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-1994	Region 3	Facility Number 16599
William Specific	1.12 0.10,00 1,7,7	Region 5	10377
BRISTOL MANOR OF WARRENTO	N		
815 WOOLF ROAD		Telephone (636) 456-1437	Alzheimer's Unit No
WARRENTON	MO 63383-6184	Level of Care: RCF	Bed Capacity 12
Mailing Address 815 WOOLF RD		County WARREN	DMH Licensed No
WARRENTON	MO 63383-6184	Region 6	Facility Number 19954
BRISTOL MANOR OF WARSAW			
1600 ESTATE DR		Telephone (660) 438-7173	Alzheimer's Unit No
WARSAW	MO 65355-3061	Level of Care: RCF	Bed Capacity 12
Mailing Address 1600 ESTATE DR		County BENTON	DMH Licensed No
WARSAW	MO 65355-3061	Region 6	Facility Number 16343
WINDIW	110 03333 3001	Region	racinty runner 10343
BRISTOL MANOR OF WASHINGTO	ON		
100 WEST 12TH ST		Telephone (636) 390-0050	Alzheimer's Unit No
WASHINGTON	MO 63090-4445	Level of Care: RCF	Bed Capacity 12
Mailing Address 100 WEST 12TH ST		County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-4445	Region 6	Facility Number 20138
BRISTOL MANOR OF WEBB CITY			
1803 NORTH MAIN, HIGHWAY D		Telephone (417) 673-4231	Alzheimer's Unit No
WEBB CITY	MO 64870-1193	Level of Care: RCF	Bed Capacity 12
Mailing Address 1803 NORTH MAIN,		County JASPER	DMH Licensed No
WEBB CITY	MO 64870-1193	Region 1	Facility Number 20537
WEDD CIT I	WIO 04670-1193	Region 1	Facility Number 2053/
BRISTOL MANOR OF WENTZVILI	LE		
840 WEST NORTHVIEW		Telephone (636) 639-6777	Alzheimer's Unit No
WENTZVILLE	MO 63385-1036	Level of Care: RCF	Bed Capacity 12
Mailing Address 840 W NORTHVIEW	•	County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-1036	Region 5	Facility Number 20397
BRISTOL MANOR OF WESTON			
178 WALNUT		Telephone (816) 386-5507	Alzheimer's Unit No
WESTON	MO 64098-1328	Level of Care: RCF	Bed Capacity 12
Mailing Address 178 WALNUT		County PLATTE	DMH Licensed No
WESTON	MO 64098-1328	Region 4	Facility Number 16741
	07070 1320	region 4	Tacing Number 10/41
BRISTOL MANOR OF WILLARD			
511 WATSON		Telephone (417) 742-0090	Alzheimer's Unit No
WILLARD	MO 65781-8314	Level of Care: RCF	Bed Capacity 12
Mailing Address 511 WATSON		County GREENE	DMH Licensed No
WILLARD	MO 65781-8314	Region 1	Facility Number 20838

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BROOK CHERITH ASSISTED LIVI	NG			
104 EAST ELM ST		Telephone (660) 277-4439	Alzheimer's Unit	No
HUNTSVILLE	MO 65259-1111	Level of Care: ALF	Bed Capacity	38
Mailing Address 104 EAST ELM ST		County RANDOLPH	DMH Licensed	Yes
HUNTSVILLE	MO 65259-1111	Region 5	Facility Number 109	918
BROOKDALE CREVE COEUR				
ONE NEW BALLAS PLACE		Telephone (314) 432-5200	Alzheimer's Unit	No
CREVE COEUR	MO 63146-8700	Level of Care: ALF**	Bed Capacity	46
Mailing Address ONE NEW BALLAS	PLACE	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63146-8700	Region 7	Facility Number 26	178
BROOKDALE WEST COUNTY				
785 HENRY AVE		Telephone (636) 527-5700	Alzheimer's Unit	Yes
BALLWIN	MO 63011-2736	Level of Care: ALF**	Bed Capacity	98
Mailing Address 785 HENRY AVE		County SAINT LOUIS COUNTY	• •	No
BALLWIN	MO 63011-2736	Region 7	Facility Number 28	149
		8	•	
BROOKDALE WORNALL PLACE				
501 WEST 107TH ST		Telephone (816) 941-7777	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5919	Level of Care: ALF**	Bed Capacity	68
Mailing Address 501 WEST 107TH ST		County JACKSON		No
KANSAS CITY	MO 64114-5919	Region 3		304
		Region	ruemey rumser 25.	JO4
BROOKE HAVEN HEALTHCARE				
1410 NORTH KENTUCKY AVE		Telephone (417) 256-7975	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-1822	Level of Care: SNF		120
Mailing Address 1410 NORTH KENT		County HOWELL	• •	No
WEST PLAINS	MO 65775-1822	Region 1 Medicare/Medicaid		253
WESTTEANS	WIO 03773-1022	Region 1 Wedicare/Medicard	racinty runner (0).	233
BROOKHAVEN NURSING & REHA	D			
3405 WEST MT VERNON	LD	Telephone (417) 874-9600	Alzheimer's Unit	No
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	Bed Capacity	90
Mailing Address 3405 WEST MT VER		County GREENE	- '	No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid		512
or run or abb		Region 1 Medicare/Medicard	Tuesting Transport	712
BROOKING PARK				
307 SOUTH WOODS MILL RD		Telephone (314) 576-5545	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-3418	Level of Care: ALF**	Bed Capacity	93
Mailing Address 307 SOUTH WOODS		County SAINT LOUIS COUNTY	• •	No
CHESTERFIELD	MO 63017-3418	Region 7		661
CIAD I DIM IDD	03017 JT10	Region /	Lucincy Number 140	<i>7</i> 0 1
BROOKING PARK				
307 SOUTH WOODS MILL RD		Telephone (314) 576-5545	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-3418	Level of Care: SNF	Bed Capacity	97
Mailing Address 307 SOUTH WOODS		County SAINT LOUIS COUNTY		No
CHESTERFIELD	MO 63017-3418	Region 7 Medicare		661
			110	

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BROOKSIDE MANOR RESIDENTIA	AL CARE, LLC			
2434 HIGHWAY H		Telephone (573) 756-6434	Alzheimer's Unit	No
FARMINGTON	MO 63640-7033	Level of Care: RCF*	Bed Capacity	20
Mailing Address 2434 HIGHWAY H		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7033	Region 2	Facility Number	20034
BRUNSWICK NURSING & REHAB				
721 W HARRISON ST		Telephone (660) 548-3182	Alzheimer's Unit	No
BRUNSWICK	MO 65236-1096	Level of Care: SNF	Bed Capacity	60
Mailing Address 721 W HARRISON S	T	County CHARITON	DMH Licensed	No
BRUNSWICK	MO 65236-1096	Region 5 Medicare/Medicaid	Facility Number	03123
DVIETA A O DD A IDVE CENTED FOR				
BUFFALO PRAIRIE CENTER FOR 631 WEST MAIN ST	KEHAB AND HEALTHCARE	Tolonhono (417) 245 5422	Alzheimer's Unit	NO
BUFFALO	MO 65622-7496	Telephone (417) 345-5422 Level of Care: SNF		60
			Bed Capacity DMH Licensed	No
Mailing Address 631 WEST MAIN ST BUFFALO	MO 65622-7496	•	Facility Number	
BUFFALO	MO 03022-7490	Region 1 Medicare/Medicaid	racinty Number	16700
BUNGALOWS AT BRANSON MEAI	DOWS, THE			
5351 GRETNA ROAD		Telephone (417) 334-3336	Alzheimer's Unit	No
BRANSON	MO 65616-7298	Level of Care: RCF	Bed Capacity	104
Mailing Address 5351 GRETNA RD		County TANEY	DMH Licensed	No
BRANSON	MO 65616-7298	Region 1	Facility Number	23683
BUNGALOWS AT CHESTERFIELD	VILLAGE, THE			
2410 WEST CHESTERFIELD BLVD		Telephone (417) 886-4000	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-8631	Level of Care: RCF	Bed Capacity	92
Mailing Address 2410 W CHESTERFI	ELD BLVD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-8631	Region 1	Facility Number	22584
BUNGALOWS AT NEVADA, THE				
640 EAST HIGHLAND		Telephone (417) 667-3883	Alzheimer's Unit	No
NEVADA	MO 64772-1091	Level of Care: RCF	Bed Capacity	37
Mailing Address 640 EAST HIGHLAN	ID	County VERNON	DMH Licensed	No
NEVADA	MO 64772-1091	Region 1	Facility Number	23732
BUNGALOWS AT SPRINGFIELD E	AST THE			
3540 EAST CHEROKEE	ASI, IIIE	Telephone (417) 889-2222	Alzheimer's Unit	No
SPRINGFIELD	MO 65809-2828	Level of Care: RCF	Bed Capacity	67
Mailing Address 3540 EAST CHEROK		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65809-2828	Region 1	Facility Number	21025
DI MINOI ILLED	110 03007-2020	Acgion 1	racinty number	21023
NAME OF THE OWN OF TH				
BUNKER RESIDENTIAL HOME		Tolonhono (572) (200 1202	Alabain TT 14	».T
500 CULLER AVE	MO (2(20	Telephone (573) 689-1392	Alzheimer's Unit	No
BUNKER Mailing Address DO DOV 276	MO 63629-	Level of Care: RCF	Bed Capacity	12 Vas
Mailing Address PO BOX 276	MO 62620 0276	County REYNOLDS	DMH Licensed	Yes
BUNKER	MO 63629-0276	Region 2	Facility Number	16882

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BUTLER CENTER FOR REHABILI	TATION AND HEALTHCARE			
416 SOUTH HIGH ST		Telephone (660) 679-6158	Alzheimer's Unit	No
BUTLER	MO 64730-1827	Level of Care: SNF	Bed Capacity	98
Mailing Address 416 S HIGH ST		County BATES	DMH Licensed	No
BUTLER	MO 64730-1827	Region 3 Medicare/Medicaid	Facility Number	08627
BUTTERFIELD RESIDENTIAL CA	RE CENTER			
1120 NORTH BUTTERFIELD RD		Telephone (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF	Bed Capacity	24
Mailing Address 1120 N BUTTERFIE	ELD RD	County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000	Region 1	Facility Number	14436
BUTTERFIELD RESIDENTIAL CA	RE CENTER			
1120 NORTH BUTTERFIELD RD		Telephone (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF*	Bed Capacity	66
Mailing Address 1120 N BUTTERFIE		County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000	Region 1	Facility Number	14436
BUTTERFLY HAVEN				
11500 CAMPBELL ST		Telephone (816) 941-2836	Alzheimer's Unit	No
KANSAS CITY	MO 64131-3829	Level of Care: RCF	Bed Capacity	12
Mailing Address PO BOX 481578	110 01131 302)	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64148-1578	Region 3	Facility Number	18207
Minorio ell'I	110 04140 1370	Region 5	racinty Number	10207
CALIFORNIA CARE CENTER				
1106 SOUTH OAK, ROUTE 3		Telephone (573) 796-3127	Alzheimer's Unit	No
CALIFORNIA	MO 65018-1462	Level of Care: SNF	Bed Capacity	60
Mailing Address 1106 SOUTH OAK, I	ROUTE 3	County MONITEAU	DMH Licensed	No
CALIFORNIA	MO 65018-1462	Region 6 Medicare/Medicaid	Facility Number	10437
CAMDENTON WINDSOR ESTATES	S	T-l-nh (572) 246 5654	A 1-1	NI-
2042 N BUSINESS ROUTE 5	MO 65020-2611	Telephone (573) 346-5654	Alzheimer's Unit	No
CAMDENTON Mailing Address 2042 N BUSINESS B		Level of Care: SNF County CAMDEN	Bed Capacity DMH Licensed	82 N-
Mailing Address 2042 N BUSINESS R CAMDENTON	MO 65020-2611	•	Facility Number	No 08688
CAMBENTON	WIO 03020-2011	Region 6 Medicare/Medicaid	Facinty Number	00000
CAMELOT NURSING AND REHAB	ILITATION CENTER			
705 GRAND CANYON DRIVE		Telephone (573) 756-8911	Alzheimer's Unit	NO
FARMINGTON	MO 63640-2161	Level of Care: SNF	Bed Capacity	97
Mailing Address 705 GRAND CANYO	ON DRIVE	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-2161	Region 2 Medicare/Medicaid	Facility Number	00978
CARE AL REON				
CAPE ALBEON		Talanhana (626) 961 2200	Alzhaiman'a Unit	Vaa
3300 LAKE BEND DR VALLEY PARK	MO 63088-2524	Telephone (636) 861-3200 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 100
Mailing Address 3300 LAKE BEND D		County SAINT LOUIS COUNTY	DMH Licensed	No
VALLEY PARK	MO 63088-2524	•	Facility Number	22838
THELITAKK	141O 03000-2324	Region 7	racinty Number	22030

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CAPETOWN ASSISTED LIVING			
2857 CAPE LACROIX RD		Telephone (573) 334-4855	Alzheimer's Unit Yes
CAPE GIRARDEAU	MO 63701-8588	Level of Care: ALF**	Bed Capacity 48
Mailing Address 2857 CAPE LACROE		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-8588	Region 2	Facility Number 23989
CAI E GINANDEAU	WIO 03701-6366	Region 2	Facility Number 23989
CAREGIVERS INN			
1297 FEISE RD		Telephone (636) 240-7979	Alzheimer's Unit Yes
DARDENNE PRAIRIE	MO 63368-6710	Level of Care: ALF**	Bed Capacity 30
Mailing Address 1297 FEISE RD		County SAINT CHARLES	DMH Licensed No
DARDENNE PRAIRIE	MO 63368-6710	Region 5	Facility Number 15342
CARL JUNCTION RESIDENTIAL C	ARE		
201 FIR RD		Telephone (417) 782-5659	Alzheimer's Unit No
CARL JUNCTION	MO 64834-9222	Level of Care: RCF*	Bed Capacity 37
Mailing Address 201 FIR RD		County JASPER	DMH Licensed No.
CARL JUNCTION	MO 64834-9222	Region 1	Facility Number 20550
CARNEGIE VILLAGE ASSISTED L	IVING FACILITY		
103 BERNARD DR		Telephone (816) 322-0844	Alzheimer's Unit No
BELTON	MO 64012-6182	Level of Care: ALF**	Bed Capacity 85
Mailing Address 103 BERNARD DR		County CASS	DMH Licensed No.
BELTON	MO 64012-6182	Region 3	Facility Number 25482
CADNECIE VII I ACE DEHARII IT	ATION & HEATTH CADE CENTED 1		
	ATION & HEALTH CARE CENTER, I		Alzheimer's Unit No
105 BERNARD DRIVE	,	Telephone (816) 348-8815	Alzheimer's Unit No
105 BERNARD DRIVE BELTON	MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF	Bed Capacity 78
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIV	MO 64012-6181 /E	Telephone (816) 348-8815 Level of Care: SNF County CASS	Bed Capacity 78 DMH Licensed No.
105 BERNARD DRIVE BELTON	MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF	Bed Capacity 78
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIV	MO 64012-6181 //E MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF County CASS	Bed Capacity 78 DMH Licensed No.
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIV BELTON	MO 64012-6181 //E MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF County CASS	Bed Capacity 78 DMH Licensed No.
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIV BELTON CARONDELET RETIREMENT MAN	MO 64012-6181 //E MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid	Bed Capacity 78 DMH Licensed No Facility Number 30531
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN	MO 64012-6181 //E MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit No
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIV BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS	MO 64012-6181 //E MO 64012-6181	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF*	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit No Bed Capacity 33
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit No Bed Capacity 33 DMH Licensed Yes
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit No Bed Capacity 33 DMH Licensed Yes
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE OF 508 NORTH WASHINGTON ST	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity 33 DMH Licensed Facility Number O1058 Alzheimer's Unit No
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE OF 508 NORTH WASHINGTON ST FARMINGTON	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF*	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit No Bed Capacity 33 DMH Licensed Yes Facility Number 01058 Alzheimer's Unit No Bed Capacity 20
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE OF 508 NORTH WASHINGTON ST	MO 64012-6181 VE MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit Bed Capacity 79 Facility Number 01058 Alzheimer's Unit No Bed Capacity 20 DMH Licensed Yes Alzheimer's Unit No Bed Capacity 20 DMH Licensed Yes
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE OF 508 NORTH WASHINGTON ST FARMINGTON	MO 64012-6181 VE MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity Facility Number Alzheimer's Unit Bed Capacity Facility Number Alzheimer's Unit Bed Capacity Alzheimer's Unit Bed Capacity Alzheimer's Unit Bed Capacity 20
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE OF 508 NORTH WASHINGTON ST FARMINGTON Mailing Address PO BOX 272 FARMINGTON	MO 64012-6181 VE MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC MO 63640-1756 MO 63640-0675	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF* County SAINT FRANCOIS	Bed Capacity 78 DMH Licensed No Facility Number 30531 Alzheimer's Unit Bed Capacity 79 Facility Number 01058 Alzheimer's Unit No Bed Capacity 20 DMH Licensed Yes Alzheimer's Unit No Bed Capacity 20 DMH Licensed Yes
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE OF 508 NORTH WASHINGTON ST FARMINGTON Mailing Address PO BOX 272 FARMINGTON CARRIAGE SQUARE REHAB AND ST	MO 64012-6181 VE MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC MO 63640-1756 MO 63640-0675	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF* County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity Onner's Unit Bed Capacity Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number O7824
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE CO 508 NORTH WASHINGTON ST FARMINGTON Mailing Address PO BOX 272 FARMINGTON CARRIAGE SQUARE REHAB AND 4009 GENE FIELD RD	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC MO 63640-1756 MO 63640-0675 HEALTHCARE CENTER	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF* County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity Onit
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE CO 508 NORTH WASHINGTON ST FARMINGTON Mailing Address PO BOX 272 FARMINGTON CARRIAGE SQUARE REHAB AND 4009 GENE FIELD RD SAINT JOSEPH	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC MO 63640-1756 MO 63640-0675 HEALTHCARE CENTER MO 64506-1864	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF* County SAINT FRANCOIS Region 2 Telephone (816) 364-1526 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity JOHH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity
105 BERNARD DRIVE BELTON Mailing Address 105 BERNARD DRIVE BELTON CARONDELET RETIREMENT MAN 6811 MICHIGAN SAINT LOUIS Mailing Address PO BOX 37073 SAINT LOUIS CARRIAGE RESIDENTIAL CARE CO 508 NORTH WASHINGTON ST FARMINGTON Mailing Address PO BOX 272 FARMINGTON CARRIAGE SQUARE REHAB AND 4009 GENE FIELD RD	MO 64012-6181 //E MO 64012-6181 NOR MO 63111-2834 MO 63141-1573 CENTER LLC MO 63640-1756 MO 63640-0675 HEALTHCARE CENTER MO 64506-1864	Telephone (816) 348-8815 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 353-9552 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (573) 756-8140 Level of Care: RCF* County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity Onit

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CARRIAGE SQUARE REHAB AND	HEALTHCARE CENTER			
4009 GENE FIELD RD		Telephone (816) 364-1526	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-1864	Level of Care: RCF*	Bed Capacity	32
Mailing Address 4009 GENE FIELD I	RD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-1864	Region 4	Facility Number	01061
CARRIE DUMAS LONG TERM CA	RE FACILITY			
2836 BENTON BLVD	THE THE PROPERTY	Telephone (816) 924-5017	Alzheimer's Unit	No
KANSAS CITY	MO 64128-1140	Level of Care: ALF	Bed Capacity	34
Mailing Address 2836 BENTON BLV		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64128-1140	Region 3	Facility Number	18550
III II	110 01120 1110	Region 5	racinty (valide)	10330
CARRIE ELLIGSON GIETNER HO	OME			
5000 SOUTH BROADWAY		Telephone (314) 752-0000	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2015	Level of Care: SNF	Bed Capacity	130
Mailing Address 5000 S BROADWA		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2015	Region 7 Medicare/Medicaid	Facility Number	02877
CARROLL HOUSE				
307 GRAND		Telephone (660) 542-1599	Alzheimer's Unit	No
CARROLLTON	MO 64633-2265	Level of Care: SNF	Bed Capacity	63
Mailing Address 307 GRAND		County CARROLL	DMH Licensed	No
CARROLLTON	MO 64633-2265	Region 4 Medicare/Medicaid	Facility Number	22027
			•	
CARTHAGE HEALTH AND REHA	BILITATION CENTER			
1901 BUENA VISTA AVE		Telephone (417) 358-1397	Alzheimer's Unit	Yes
CARTHAGE	MO 64836-3178	Level of Care: SNF	Bed Capacity	120
Mailing Address 1901 BUENA VISTA		County JASPER	DMH Licensed	No
CARTHAGE	MO 64836-3178	Region 1 Medicare/Medicaid	Facility Number	12472
CASSVILLE HEALTH CENTER FO	OR REHAB AND HEALTHCARE			
1300 COUNTY FARM RD		Telephone (417) 847-3386	Alzheimer's Unit	No
CASSVILLE	MO 65625-1726	Level of Care: SNF	Bed Capacity	60
Mailing Address 1300 COUNTY FAR	RM RD	County BARRY	DMH Licensed	No
CASSVILLE	MO 65625-1726	Region 1 Medicare/Medicaid	Facility Number	01097
CACTI EMOOD CENIOD I MINO	PITE			
CASTLEWOOD SENIOR LIVING T 1538 N OLD CASTLE ROAD	ITE	Telephone (417) 724 9199	Alaboin In Till	Yes
NIXA	MO 65714 0002	Telephone (417) 724-8188 Level of Care: ALF**	Alzheimer's Unit	
	MO 65714-9902		Bed Capacity	66 N
Mailing Address 1538 N OLD CASTI		County CHRISTIAN	DMH Licensed	No
NIXA	MO 65714-9902	Region 1	Facility Number	30722
CEDAR KNOLL PARTNERSHIP				
13635 STATE ROUTE V		Telephone (573) 265-3658	Alzheimer's Unit	No
SAINT JAMES	MO 65559-8331	Level of Care: ALF	Bed Capacity	32
Mailing Address 13635 STATE ROU	TE V	County PHELPS	DMH Licensed	Yes
SAINT JAMES	MO 65559-8331	Region 6	Facility Number	01142

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CEDAR POINTE		
1800 WHITE COLUMNS DR	Telephone (573) 36	4-7766 Alzheimer's Unit Yes
ROLLA MO 65401-	2044 Level of Care: SNF	Bed Capacity 102
Mailing Address 1800 WHITE COLUMNS DR	County PHELPS	DMH Licensed No
ROLLA MO 65401-	2044 Region 6 Medicare/	Medicaid Facility Number 06801
CEDAR RIDGE CARE CENTER, LLC	(417) 0.4	7.516
71 SYCAMORE	Telephone (417) 84	
CASSVILLE MO 65625-		Bed Capacity 30
Mailing Address PO BOX 633	County BARRY	DMH Licensed Yes
CASSVILLE MO 65625-	0633 Region 1	Facility Number 15295
CEDAR VALLEY BOARDING HOME		
286 HIGHWAY VV	Telephone (573) 68	6-4877 Alzheimer's Unit No
BROSELEY MO 63932-	• '	Bed Capacity 10
Mailing Address 286 HIGHWAY VV	County BUTLER	DMH Licensed Yes
BROSELEY MO 63932-	·	Facility Number 08923
		•
CEDARCREST MANOR	TEMPO	PRARY CLOSURE - STAFFING
324 WEST 5TH ST	Telephone (636) 23	9-7848 Alzheimer's Unit Yes
WASHINGTON MO 63090-	2306 Level of Care: SNF	Bed Capacity 177
Mailing Address 324 WEST 5TH ST	County FRANKLIN	DMH Licensed No
WASHINGTON MO 63090-	2306 Region 6 Medicare/	Medicaid Facility Number 01160
CEDARGATE HEALTHCARE		
2350 KANELL BLVD	Telephone (573) 78	
POPLAR BLUFF MO 63901-		Bed Capacity 16
Mailing Address 2350 KANELL BLVD	County BUTLER	DMH Licensed No
POPLAR BLUFF MO 63901-	4036 Region 2	Facility Number 01182
CEDARGATE HEALTHCARE		
2350 KANELL BLVD	Telephone (573) 78	5-0188 Alzheimer's Unit No
POPLAR BLUFF MO 63901-	4036 Level of Care: SNF	Bed Capacity 108
Mailing Address 2350 KANELL BLVD	County BUTLER	DMH Licensed No
POPLAR BLUFF MO 63901-	4036 Region 2 Medicare/	Medicaid Facility Number 01182
CEDARHURST OF ARNOLD	m	
2069 MISSOURI STATE ROAD	Telephone (636) 33	
ARNOLD MO 63010-		Bed Capacity 84
Mailing Address 2069 MISSOURI STATE ROAD	County JEFFERSON	DMH Licensed No
ARNOLD MO 63010-	4809 Region 2	Facility Number 32428
CEDARHURST OF BLUE SPRINGS		
20551 E TRINITY PLACE	Telephone (816) 68	5-8863 Alzheimer's Unit Yes
BLUE SPRINGS MO 64015-		Bed Capacity 89
Mailing Address 20551 E TRINITY PLACE	County JACKSON	DMH Licensed No

Region 3

Facility Number

31581

MO 64015-9501

BLUE SPRINGS

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CEDARHURST OF COLUMBIA				
2333 CHAPEL HILL RD		Telephone (573) 234-1091	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-1537	Level of Care: ALF**	Bed Capacity	127
Mailing Address 2333 CHAPEL HILL R	RD.	County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-1537	Region 6	Facility Number	29874
CEDARHURST OF DES PERES				
12826 DAYLIGHT CIRCLE		Telephone (314) 916-6614	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63131-1890	Level of Care: ALF**	Bed Capacity	76
Mailing Address 12826 DAYLIGHT CIF		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63131-1890	Region 7	Facility Number	30351
SAINT LOUIS	WO 03131-1690	Region /	racinty Number	30331
CEDARHURST OF FARMINGTON				
200 MAPLE VALLEY DRIVE		Telephone (573) 713-9150	Alzheimer's Unit	Yes
FARMINGTON	MO 63640-7331	Level of Care: ALF**	Bed Capacity	84
Mailing Address 200 MAPLE VALLEY	DRIVE	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-7331	Region 2	Facility Number	32159
CEDARHURST OF LEBANON ASSIS	TED LIVING & MEMORY CARE			
842 LYNN STREET		Telephone (417) 815-0122	Alzheimer's Unit	Yes
LEBANON	MO 65536-3832	Level of Care: ALF**	Bed Capacity	90
Mailing Address 842 LYNN STREET		County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-3832	Region 1	Facility Number	31890
			•	
CEDARHURST OF SEDALIA				
3761 WEST 10TH ST		Telephone (660) 827-8900	Alzheimer's Unit	No
SEDALIA	MO 65301-2524	Level of Care: ALF**	Bed Capacity	90
Mailing Address 3761 WEST 10TH ST	150 (500) 050)	County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-2524	Region 6	Facility Number	25967
CEDARHURST OF SPRINGFIELD				
1146 EAST LAKEWOOD ST		Telephone (417) 885-9050	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65810-2614	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1146 E LAKEWOOD S	ST	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65810-2614	Region 1	Facility Number	28295
CEDARHURST OF ST. CHARLES AS	SISTED I IVING & MEMORY CARE	•		
1800 FIRST CAPITOL DRIVE	SISTED ETVING & MEMORT CARE	Telephone (636) 255-8094	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63301-1646	Level of Care: ALF**	Bed Capacity	155
Mailing Address 1800 FIRST CAPITOL		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-1646	Region 5	Facility Number	30676
Samue Chambles	3-10 00001 10 1 0	region 5	racincy muniber	30070
CEDARHURST OF TESSON HEIGHT	rs			
12335 WEST BEND DR		Telephone (314) 849-1366	Alzheimer's Unit	No
SAINT LOUIS	MO 63128-2160	Level of Care: ALF**	Bed Capacity	79
Mailing Address 12335 WEST BEND D	K .	County SAINT LOUIS COUNTY	IMALL Licensed	N.T
SAINT LOUIS	MO 63128-2160	Region 7	DMH Licensed Facility Number	No 13663

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CEDARHURST OF WEST PLAINS				
1521 US HIGHWAY 63		Telephone (417) 372-8940	Alzheimer's Unit	YES
WEST PLAINS	MO 65775-9809	Level of Care: ALF**	Bed Capacity	84
Mailing Address 1521 US HIGHWAY	63	County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-9809	Region 1	Facility Number	32028
CEDARS OF LIBERTY HEALTH C	ADE CENTED			
200 WEST RUTH EWING RD	ARE CENTER	Telephone (816) 781-7600	Alzheimer's Unit	No
LIBERTY	MO 64068-9496	Level of Care: RCF	Bed Capacity	206
Mailing Address 200 WEST RUTH EV		County CLAY	DMH Licensed	Yes
LIBERTY	MO 64068-9496	Region 4	Facility Number	13854
LIBERTT	110 04000 7470	Region 4	racinty rumber	13034
CENTRAL GARDENS INC				
302 NORTH ELM ST		Telephone (573) 624-0011	Alzheimer's Unit	No
DEXTER	MO 63841-1773	Level of Care: RCF*	Bed Capacity	83
Mailing Address 302 NORTH ELM ST	Γ	County STODDARD	DMH Licensed	No
DEXTER	MO 63841-1773	Region 2	Facility Number	18858
CENTRAL RESIDENCE, THE				
5143 WATERMAN BLVD		Telephone (314) 367-5620	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-1103	Level of Care: RCF*	Bed Capacity	41
Mailing Address 5143 WATERMAN I	BLVD	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-1103	Region 7	Facility Number	02785
		9	·	
~				
CENTURY PINES ASSISTED LIVIN	G			
709 EAST MCCRACKEN RD		Telephone (417) 581-7278	Alzheimer's Unit	No
OZARK	MO 65721-9499	Level of Care: ALF	Bed Capacity	58
Mailing Address 709 EAST MCCRAC		County CHRISTIAN	DMH Licensed	Yes
OZARK	MO 65721-9499	Region 1	Facility Number	01200
CENTURY PINES ASSISTED LIVIN	IG			
709 EAST MCCRACKEN RD		Telephone (417) 581-7278	Alzheimer's Unit	No
OZARK	MO 65721-9499	Level of Care: ALF**	Bed Capacity	18
Mailing Address 709 EAST MCCRAC	KEN RD	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-9499	Region 1	Facility Number	01200
CHAFFEE NURSING CENTER				
12273 STATE HIGHWAY 77		Telephone (573) 887-3615	Alzheimer's Unit	No
CHAFFEE	MO 63740-8219	Level of Care: SNF	Bed Capacity	71
Mailing Address 12273 STATE HIGH		County SCOTT	DMH Licensed	No
CHAFFEE	MO 63740-8219	Region 2 Medicare/Medicaid	Facility Number	13652
	05/10 021/	region 2 wieuleare/wieuleald	racincy (tumber	15032
CHARITON PARK HEALTH CARE	CENTER			
902 MANOR DR		Telephone (660) 388-6486	Alzheimer's Unit	No
SALISBURY	MO 65281-1236	Level of Care: SNF	Bed Capacity	120
Mailing Address 902 MANOR DR		County CHARITON	DMH Licensed	No
SALISBURY	MO 65281-1236	Region 5 Medicare/Medicaid	Facility Number	06469

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CHARLESTON MANOR			
1220 EAST MARSHALL	Telephone (573) 683-3721	Alzheimer's Unit	Yes
CHARLESTON MO 63834-1349	Level of Care: SNF	Bed Capacity	120
Mailing Address 1220 EAST MARSHALL	County MISSISSIPPI	DMH Licensed	No
CHARLESTON MO 63834-1349	Region 2 Medicare/Medicaid	Facility Number	01251
CHATEAU ANN MARIE			
7700 MINNESOTA AVE	Telephone (314) 449-1497	Alzheimer's Unit	No
SAINT LOUIS MO 63111-3336	Level of Care: ALF	Bed Capacity	22
Mailing Address 7700 MINNESOTA AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63111-3336	Region 7	Facility Number	14711
CHATEAU GIRARDEAU			
3120 INDEPENDENCE ST	Telephone (573) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63703-5043	Level of Care: ALF**	Bed Capacity	55
Mailing Address 3120 INDEPENDENCE ST	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU MO 63703-5043	Region 2	Facility Number	01386
CHATEAU GIRARDEAU			
3120 INDEPENDENCE ST	Telephone (573) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63703-5043	Level of Care: SNF	Bed Capacity	75
Mailing Address 3120 INDEPENDENCE ST	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU MO 63703-5043	Region 2 Medicare/Medicaid	Facility Number	01386
CHEROKEE RESIDENTIAL CARE ACQUISITION, LLC			
3409 MISSOURI AVE	Telephone (314) 771-8360	Alzheimer's Unit	No
SAINT LOUIS MO 63118-3236	Level of Care: RCF*	Bed Capacity	30
Mailing Address 3409 MISSOURI AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63118-3236	Region 7	Facility Number	14047
CHECKER PRINT DAILY A C			
CHESTERFIELD VILLAS 14901 N OUTER 40 RD	Telephone (636) 532-9296	Alzheimer's Unit	No
	•		57
		Bed Capacity	
Mailing Address 14901 N OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD MO 63017-6034	Region 7	Facility Number	29067
	g		
CHESTNIT GI ENN . ASSISTED I IVING RV AMEDICADE	S		
CHESTNUT GLENN - ASSISTED LIVING BY AMERICARE		Alzheimer's Unit	
121 KLONDIKE CROSSING	Telephone (636) 928-4200	Alzheimer's Unit	Yes
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394	Telephone (636) 928-4200 Level of Care: ALF**	Bed Capacity	Yes 74
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 Mailing Address 121 KLONDIKE CROSSING	Telephone (636) 928-4200 Level of Care: ALF** County SAINT CHARLES	Bed Capacity DMH Licensed	Yes 74 No
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394	Telephone (636) 928-4200 Level of Care: ALF**	Bed Capacity	Yes 74
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 Mailing Address 121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394	Telephone (636) 928-4200 Level of Care: ALF** County SAINT CHARLES	Bed Capacity DMH Licensed	Yes 74 No
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 Mailing Address 121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 CHESTNUT REHAB AND NURSING	Telephone (636) 928-4200 Level of Care: ALF** County SAINT CHARLES Region 5	Bed Capacity DMH Licensed	Yes 74 No
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 Mailing Address 121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394	Telephone (636) 928-4200 Level of Care: ALF** County SAINT CHARLES	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	Yes 74 No 25446
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 Mailing Address 121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 CHESTNUT REHAB AND NURSING 10954 KENNERLY RD	Telephone (636) 928-4200 Level of Care: ALF** County SAINT CHARLES Region 5 Telephone (314) 843-4242	Bed Capacity DMH Licensed Facility Number	Yes 74 No 25446
121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 Mailing Address 121 KLONDIKE CROSSING SAINT PETERS MO 63376-5394 CHESTNUT REHAB AND NURSING 10954 KENNERLY RD SAINT LOUIS MO 63128-2018	Telephone (636) 928-4200 Level of Care: ALF** County SAINT CHARLES Region 5 Telephone (314) 843-4242 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	Yes 74 No 25446 No 167

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CHRISTIAN EXTENDED CARE & F	REHABILITATION			
11160 VILLAGE NORTH DR		Telephone (314) 355-8010	Alzheimer's Unit	No
SAINT LOUIS	MO 63136-6159	Level of Care: SNF	Bed Capacity	60
Mailing Address 11160 VILLAGE NO	RTH DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63136-6159	Region 7 Medicare/Medicaid	Facility Number 083	800
CHURCHILL TERRACE - ASSISTE	D LIVING RY AMERICARE			
120 HOSPITAL DR	DEIVING DI MMERICARE	Telephone (573) 642-5222	Alzheimer's Unit	No
FULTON	MO 65251-2511	Level of Care: ALF**		57
Mailing Address 120 HOSPITAL DR	WIO 03231 2311	County CALLAWAY		No.
FULTON	MO 65251-2511	Region 6	Facility Number 207	
POLION	WIO 03231-2311	Region 0	racinty Number 207	03
CITIZENS MEMORIAL HEALTH C	CARE FACILITY	T. I	A 3 3 4 4 77 4/	
1218 W LOCUST ST	1.0 (5.40.404)	Telephone (417) 326-7648		No
BOLIVAR	MO 65613-1312	Level of Care: SNF		11
Mailing Address PO BOX 590		County POLK		No
BOLIVAR	MO 65613-0590	Region 1 Medicare/Medicaid	Facility Number 007	10
CLARA MANOR NURSING HOME			-	
3621 WARWICK BLVD		Telephone (816) 756-1593		No
KANSAS CITY	MO 64111-1403	Level of Care: SNF		90
Mailing Address 3621 WARWICK BL		County JACKSON		No
KANSAS CITY	MO 64111-1403	Region 3 Medicaid	Facility Number 141	.02
CLARENCE CARE CENTER				
111 EAST ST		Telephone (660) 699-2118		No
CLARENCE	MO 63437-1902	Level of Care: SNF		60
Mailing Address 111 EAST ST		County SHELBY		No
CLARENCE	MO 63437-1902	Region 5 Medicare/Medicaid	Facility Number 014	175
CLARENDALE CLAYTON				_
7651 CLAYTON ROAD		Telephone (314) 390-9399		l'es
CLAYTON	MO 63317-1419	Level of Care: ALF**		98
Mailing Address 7651 CLAYTON RO.		County SAINT LOUIS COUNTY		No
CLAYTON	MO 63317-1419	Region 7	Facility Number 325	528
CI A DENIDAY IS ON OF THE TOTAL				
CLARENDALE OF ST PETERS				
10 DUBRAY DRIVE		Telephone (636)706-5100	•	yes
SAINT PETERS	MO 63376-3558	Level of Care: ALF**		10
Mailing Address 10 DUBRAY DRIVE		County SAINT CHARLES		No
SAINT PETERS	MO 63376-3558	Region 5	Facility Number 320	95
OV A DAY CA DE CENTER OF THE				
CLARK CARE CENTER - ONE		T-l (417) 667 2000	A last administrative of the Control	NT.
1505 EAST ASHLAND ST	MO (4772 4025	Telephone (417) 667-3900		No
NEVADA	MO 64772-4025	Level of Care: RCF*		38
Mailing Address PO BOX 246	NO 64550 0046	County VERNON		res
NEVADA	MO 64772-0246	Region 1	Facility Number 202	206

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CLARK COUNTY NURSING HOME			
1260 N JOHNSON ST		Telephone (660) 727-3303	Alzheimer's Unit No
KAHOKA	MO 63445-1100	Level of Care: SNF	Bed Capacity 103
Mailing Address 1260 N JOHNSON ST		County CLARK	DMH Licensed No
KAHOKA	MO 63445-1100	Region 5 Medicare/Medicaid	Facility Number 01480
CLARK COUNTY NURSING HOME			
1260 N JOHNSON ST		Telephone (660) 727-3303	Alzheimer's Unit No
KAHOKA	MO 63445-1100	Level of Care: RCF*	Bed Capacity 22
Mailing Address 1260 N JOHNSON ST			DMH Licensed No
KAHOKA	MO 63445-1100	•	
KAHOKA	MO 03443-1100	Region 5	Facility Number 01480
CLARK'S MOUNTAIN NURSING CI	ENTER		
2100 BARNES		Telephone (573) 223-4297	Alzheimer's Unit No
PIEDMONT	MO 63957-1008	Level of Care: SNF	Bed Capacity 91
Mailing Address 2100 BARNES		County WAYNE	DMH Licensed No
PIEDMONT	MO 63957-1008	Region 2 Medicare/Medicaid	Facility Number 01496
CLARU DEVILLE NURSING CENT	ER		
105 SPRUCE ST		Telephone (573) 783-3993	Alzheimer's Unit Yes
FREDERICKTOWN	MO 63645-1002	Level of Care: SNF	Bed Capacity 90
Mailing Address 105 SPRUCE ST		County MADISON	DMH Licensed No
FREDERICKTOWN	MO 63645-1002	Region 2 Medicare/Medicaid	Facility Number 17527
CLEARVIEW NURSING CENTER			
430 SALCEDO ROAD		Telephone (573) 471-2565	Alzheimer's Unit No
SIKESTON	MO 63801-4802	Level of Care: SNF	Bed Capacity 98
Mailing Address PO BOX 707		County SCOTT	DMH Licensed No
SIKESTON	MO 63801-0707	Region 2 Medicare/Medicaid	Facility Number 19913
			•
CLINTON HEALTHCARE AND REI	HABILITATION CENTER		
1009 EAST OHIO		Telephone (660) 885-5571	Alzheimer's Unit No
CLINTON	MO 64735-2455	Level of Care: SNF	Bed Capacity 120
Mailing Address 1009 EAST OHIO		County HENRY	DMH Licensed No
CLINTON	MO 64735-2455	Region 1 Medicare/Medicaid	Facility Number 01318
COATES STREET COMFORT HOU	SE.		
612 WEST COATES ST	OL.	Telephone (660) 263-6759	Alzheimer's Unit No
MOBERLY	MO 65270-1319	Level of Care: RCF	
	1410 03210-1317		Bed Capacity 20 DMH Licensed Yes
Mailing Address PO BOX 781 MOBERLY	MO 65270-0781	•	
WODERLI	WO 032/0-0/81	Region 5	Facility Number 08220
COLLIER CARE HOME, INC			
3001 NW VESPER ST		Telephone (816) 225-9317	Alzheimer's Unit No
BLUE SPRINGS	MO 64015-3104	Level of Care: RCF*	Bed Capacity 15
Mailing Address 3001 NW VESPER S	Γ	County JACKSON	DMH Licensed Yes
BLUE SPRINGS	MO 64015-3104	Region 3	Facility Number 01591

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COLONIAL HOME, THE		Telephone (573) 996-4283	Alzheimer's Unit No
102 SUMMIT ST DONIPHAN	MO 63935-1328	Telephone (573) 996-4283 Level of Care: ALF**	Bed Capacity 31
Mailing Address 102 SUMMIT ST	WIO 03933-1326	County RIPLEY	DMH Licensed No
DONIPHAN	MO 63935-1328	Region 2	Facility Number 01610
DOIVILIDAY	110 03733 1320	Region 2	Tacinty Number 01010
COLONIAL HOUSE OF FESTUS I			
500 SUNSHINE DR		Telephone (636) 937-7140	Alzheimer's Unit No
FESTUS	MO 63028-1645	Level of Care: RCF	Bed Capacity 30
Mailing Address 500 SUNSHINE DR		County JEFFERSON	DMH Licensed Yes
FESTUS	MO 63028-1645	Region 2	Facility Number 00726
COLONIAL HOUSE OF FESTUS II			
COLONIAL HOUSE OF FESTUS II 129 GRAY ST		Telephone (636) 933-4050	Alzheimer's Unit No
FESTUS	MO 63028-1950	Level of Care: RCF	Bed Capacity 20
Mailing Address 129 GRAY ST	WIO 03020-1730	County JEFFERSON	DMH Licensed No
FESTUS	MO 63028-1950	Region 2	Facility Number 07322
ILDICS	WG 03020 1930	Region 2	rucinty runnser 07322
COLONIAL MANOR, LLC			
907 WEST MALONE ST		Telephone (573) 471-5541	Alzheimer's Unit No
SIKESTON	MO 63801-2425	Level of Care: ALF	Bed Capacity 20
Mailing Address 907 WEST MALONE		County SCOTT	DMH Licensed Yes
SIKESTON	MO 63801-2425	Region 2	Facility Number 13255
COLONIAL RESIDENTIAL CARE F	FACILITY II		
1162 CEDAR ST		Telephone (573) 734-2846	Alzheimer's Unit No
BISMARCK	MO 63624-8920	Level of Care: RCF*	Bed Capacity 48
Mailing Address PO BOX 134		County SAINT FRANCOIS	DMH Licensed Yes
MOUNTAIN GROVE	MO 65711-0134	Region 2	Facility Number 01693
COLONIAL SPRINGS HEALTHCAI	RE CENTER		
750 W COOPER ST	RE CENTER	Telephone (417) 345-2228	Alzheimer's Unit Yes
BUFFALO	MO 65622-8662	Level of Care: SNF	Bed Capacity 134
Mailing Address PO BOX 978		County DALLAS	DMH Licensed No
BUFFALO	MO 65622-0978	Region 1 Medicare/Medicaid	Facility Number 01302
COLONY POINTE-ASSISTED LIVIN	NC RV AMERICARE		
1510 CHAPEL HILL RD	O DI AMENICARE	Telephone (573) 234-1193	Alzheimer's Unit Yes
COLUMBIA	MO 65203-5457	Level of Care: ALF**	Bed Capacity 59
Mailing Address 1510 CHAPEL HILL		County BOONE	DMH Licensed No
COLUMBIA	MO 65203-5457	Region 6	Facility Number 28191
		- vagavar v	20171
COLUMBIA MANOR CARE CENTE	CR		
2012 NIFONG BLVD		Telephone (573) 449-1246	Alzheimer's Unit No
COLUMBIA	MO 65201-3874	Level of Care: SNF	Bed Capacity 52
Mailing Address 2012 NIFONG BLVD		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-3874	Region 6 Medicare/Medicaid	Facility Number 01715

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COLUMBIA POST ACUTE			
3535 BERRYWOOD DRIVE		Telephone (573) 397-7144	Alzheimer's Unit No
	IO 65201-6584	Level of Care: SNF	Bed Capacity 70
Mailing Address 3535 BERRYWOOD DR	IVE	County BOONE	DMH Licensed No
COLUMBIA M	IO 65201-6584	Region 6 Medicare/Medicaid	Facility Number 30959
COLUMBIA STREET RESIDENTIAL O	CARE CENTER LLC		
208 WEST COLUMBIA ST		Telephone (573) 756-7481	Alzheimer's Unit No
FARMINGTON M	IO 63640-1705	Level of Care: RCF	Bed Capacity 16
Mailing Address PO BOX 272		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON M	1O 63640-0675	Region 2	Facility Number 01729
	COV.		
COMMUNITIES OF WILDWOOD RAN 3222 SOUTH JOHN DUFFY DR	СН	Tolophone (417) 621 0175	Alzheimer's Unit No
	AO (4904 1570	Telephone (417) 621-0175	
	1O 64804-1569	Level of Care: SNF	Bed Capacity 120
Mailing Address 3222 SOUTH JOHN DUI		County JASPER	DMH Licensed No
JOPLIN M	MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number 29077
COMMUNITY CARE CENTER OF LEM	MAY, INC		
9353 SOUTH BROADWAY		Telephone (314) 631-0540	Alzheimer's Unit No
	1O 63125-1600	Level of Care: SNF	Bed Capacity 60
Mailing Address 9353 SOUTH BROADW		County SAINT LOUIS COUNTY	DMH Licensed No
0	MO 63125-1600	Region 7 Medicare/Medicaid	Facility Number 01732
SAINI LOOIS	10 03123-1000	Region / Medicare/Medicaid	racinty Number 01/32
COMMUNITY MANOR			
783 WEBER ROAD		Telephone (573) 756-8998	Alzheimer's Unit No
FARMINGTON M	1O 63640-3318	Level of Care: SNF	Bed Capacity 99
Mailing Address 783 WEBER RD		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON N	1O 63640-3318	Region 2 Medicare/Medicaid	Facility Number 13887
COMMUNITY OF AUTUMN COURT A 1421 S LANDRUM ST	T MT VERNON, THE	T-1 (417) 466 2540	Allahadan anta Tirada Ni
	40. 65712 1012	Telephone (417) 466-3549	Alzheimer's Unit No
	IO 65712-1912	Level of Care: ALF**	Bed Capacity 34
Mailing Address 1421 S LANDRUM ST	40. 65712 1012	County LAWRENCE	DMH Licensed No
MOUNT VERNON M	MO 65712-1912	Region 1	Facility Number 20809
COMMUNITY SPRINGS HEALTHCAR	E FACILITY		
400 EAST HOSPITAL RD		Telephone (417) 876-2531	Alzheimer's Unit Yes
	1O 64744-2024	Level of Care: SNF	Bed Capacity 120
Mailing Address 400 EAST HOSPITAL R		County CEDAR	DMH Licensed No
_	IO 64744-2024	Region 1 Medicare/Medicaid	Facility Number 01740
LL DOM DO DI MITOD	0.711 2021	region 1 medical e/medicalu	2 10 mg 1 mms 1 01/40
CONVERSE HOME			
17025 OLD JAMESTOWN RD		Telephone (314) 355-8041	Alzheimer's Unit No
	IO 63034-1414	Level of Care: RCF	Bed Capacity 12
Mailing Address 17025 OLD JAMESTOW	'N RD	County SAINT LOUIS COUNTY	DMH Licensed Yes
FLORISSANT N	IO 63034-1414	Region 7	Facility Number 01777

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COOPER HOUSE				
4385 MARYLAND AVE		Telephone (314) 535-1919	Alzheimer's Unit No	
	MO 63108-2703	Level of Care: RCF*	Bed Capacity 36	
Mailing Address 4385 MARYLAND AV		County SAINT LOUIS CITY	DMH Licensed Yes	
SAINT LOUIS	MO 63108-2703	Region 7	Facility Number 21439)
COPPER ROCK HEALTHCARE				
712 COPPER ROCK DRIVE		Telephone (417) 202-4606	Alzheimer's Unit No)
	MO 65742-8970	Level of Care: SNF	Bed Capacity 90	
Mailing Address PO BOX 560		County WEBSTER	DMH Licensed No	0
S .	MO 65742-8970	Region 1 Medicare/Medicaid	Facility Number 31851	l
CORI MANOR HEALTHCARE & REF	HABILITATION CENTER			
560 CORISANDE HILLS RD		Telephone (636) 343-2282	Alzheimer's Unit No)
FENTON	MO 63026-5613	Level of Care: SNF	Bed Capacity 144	4
Mailing Address 560 CORISANDE HILL	LS RD	County JEFFERSON	DMH Licensed No.	Э
FENTON	MO 63026-5613	Region 2 Medicare/Medicaid	Facility Number 01800)
COTTAGE AT CENTURY PINES, THI	E			
707 EAST MCCRACKEN ROAD		Telephone (417) 581-7278	Alzheimer's Unit Yes	s
OZARK	MO 65721-9499	Level of Care: ALF**	Bed Capacity 24	4
Mailing Address 709 EAST MCCRACKE	EN ROAD	County CHRISTIAN	DMH Licensed No	0
o .	MO 65721-9499	Region 1	Facility Number 30579)
			•	
COTTAGES OF LAKE ST LOUIS				
2885 TECHNOLOGY DRIVE		Telephone (636) 614-3510	Alzheimer's Unit No	
	MO 63367-4123	Level of Care: SNF	Bed Capacity 60	
Mailing Address 2885 TECHNOLOGY D		County SAINT CHARLES	DMH Licensed No	
LAKE SAINT LOUIS	MO 63367-4123	Region 5 Medicare	Facility Number 30318	3
COTTON POINT LIVING CENTER				
609 SOUTH RAILROAD ST		Telephone (573) 471-7861	Alzheimer's Unit Yes	S
MATTHEWS	MO 63867-9751	Level of Care: SNF	Bed Capacity 98	3
Mailing Address 609 SOUTH RAILROA	D ST	County NEW MADRID	DMH Licensed No	Э
MATTHEWS	MO 63867-9751	Region 2 Medicare/Medicaid	Facility Number 07057	7
COUNTRY AIRE ESTATES, LLC				
49303 RENSSELAER LN		Telephone (573) 221-5400	Alzheimer's Unit No)
	MO 63401-7356	Level of Care: RCF*	Bed Capacity 16	
Mailing Address 49303 RENSSELAER I		County RALLS	DMH Licensed Yes	s
	MO 63401-7356	Region 5	Facility Number 14270)
COUNTRY AIRE RETIREMENT CEN	TER			
18540 STATE HIGHWAY 16	ILK	m. 1. 1. (550) 245 224 5	Alabaiaa ala Tinia)
		Telephone (573) 215-2216	Alzneimer's Unii	
	MO 63452-2111	Telephone (573) 215-2216 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 60	
LEWISTOWN	MO 63452-2111 AY 16	Level of Care: SNF	Bed Capacity 60	0
LEWISTOWN Mailing Address 18540 STATE HIGHWA		- · · · · · · · · · · · · · · · · · · ·		0

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COUNTRY AIRE RETIREMENT CENT	ER			
18540 STATE HIGHWAY 16		Telephone (573) 215-2216	Alzheimer's Unit	No
LEWISTOWN M	IO 63452-2111	Level of Care: RCF*	Bed Capacity	16
Mailing Address 18540 STATE HIGHWAY	Y 16	County LEWIS	DMH Licensed	No
LEWISTOWN M	IO 63452-2111	Region 5	Facility Number	16896
COUNTRY CLUB REHAB AND HEALT	HCARE CENTER			
503 REGENT DR		Telephone (660) 429-4444	Alzheimer's Unit	No
	IO 64093-3231	Level of Care: RCF*	Bed Capacity	40
Mailing Address 503 REGENT DR	010,55 5251	County JOHNSON	DMH Licensed	No
_	IO 64093-3231	Region 3	Facility Number	20892
WARRENSBURG	10 040/3-3231	Region 5	racinty Number	20092
COLINERY OF THE DEVIA BANK THE VIEW T	WICH DE CENTEED			
COUNTRY CLUB REHAB AND HEALT	HCARE CENTER	m		
503 REGENT DR		Telephone (660) 429-4444	Alzheimer's Unit	No
	IO 64093-3231	Level of Care: SNF	Bed Capacity	73
Mailing Address 503 REGENT DR		County JOHNSON	DMH Licensed	No
WARRENSBURG M	IO 64093-3231	Region 3 Medicare/Medicaid	Facility Number	20892
COUNTRY LIVING ASSISTED LIVING				
2820 NORTH MAIN ST		Telephone (417) 926-1955	Alzheimer's Unit	No
MOUNTAIN GROVE M	IO 65711-1403	Level of Care: ALF	Bed Capacity	40
Mailing Address 2820 NORTH MAIN ST		County WRIGHT	DMH Licensed	No
MOUNTAIN GROVE M	IO 65711-1403	Region 1	Facility Number	27548
COUNTRY MEADOWS				
1301 N ST JOE DR		Telephone (573) 431-2889	Alzheimer's Unit	No
PARK HILLS M	IO 63601-1965	Level of Care: SNF	Bed Capacity	72
Mailing Address 1301 N ST JOE DR		County SAINT FRANCOIS	DMH Licensed	No
PARK HILLS M	IO 63601-1965	Region 2 Medicare/Medicaid	Facility Number	14443
COUNTRY MEADOWS				
1301 N ST JOE DR		Telephone (573) 431-2889	Alzheimer's Unit	No
PARK HILLS M	IO 63601-1965	Level of Care: ALF	Bed Capacity	15
Mailing Address 1301 N ST JOE DR		County SAINT FRANCOIS	DMH Licensed	No
PARK HILLS M	IO 63601-1965	Region 2	Facility Number	14443
COUNTRY OAK VILLAGE				
101 CROSS CREEK DR		Telephone (816) 224-2700	Alzheimer's Unit	No
GRAIN VALLEY M	IO 64029-9561	Level of Care: ALF**	Bed Capacity	32
Mailing Address 101 CROSS CREEK DR		County JACKSON	DMH Licensed	No
	IO 64029-9561	Region 3	Facility Number	24279
CHAIN THEREIT	01027 7001	region 5	Turney Humber	<u> </u>
COUNTRY PLACE				
28601 US HIGHWAY 61		Telephone (573) 264-1555	Alzheimer's Unit	No
	IO 63780-9143	Level of Care: ALF	Bed Capacity	24
Mailing Address 28601 US HIGHWAY 61		County SCOTT	DMH Licensed	No
	IO 63780-9143	Region 2	Facility Number	25934
SCOTI CITT IVI	10 03/00-7173	Region 2	racincy rannoci	43734

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COUNTRY VALLEY HOME				
15750 COUNTY RD 2430		Telephone (573) 265-8250	Alzheimer's Unit	No
SAINT JAMES	MO 65559-8211	Level of Care: RCF*	Bed Capacity	23
Mailing Address 15750 COUNTY RI		County PHELPS	DMH Licensed	Yes
SAINT JAMES	MO 65559-8211	Region 6	Facility Number	01852
COUNTRY VIEW NURSING FACI	LITY, INC			
2106 WEST MAIN ST	222 2, 21 (0	Telephone (573) 324-2216	Alzheimer's Unit	No
BOWLING GREEN	MO 63334-1049	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 330	1120 00001 1019	County PIKE	DMH Licensed	No
BOWLING GREEN	MO 63334-0330	Region 5 Medicare/Medicaid	Facility Number	14926
COUNTRYSIDE CARE CENTER, I	H.C			
385 SOUTH EISENHOWER		Telephone (417) 235-4040	Alzheimer's Unit	No
MONETT	MO 65708-8266	Level of Care: RCF*	Bed Capacity	33
Mailing Address PO BOX 434	1120 02700 0200	County BARRY	DMH Licensed	Yes
MONETT	MO 65708-0434	Region 1	Facility Number	12737
			·	
COUNTRYSIDE ESTATES				
500 NORTH OHIO		Telephone (660) 476-2128	Alzheimer's Unit	No
APPLETON CITY	MO 64724-1625	Level of Care: RCF*	Bed Capacity	24
Mailing Address PO BOX 98		County SAINT CLAIR	DMH Licensed	No
APPLETON CITY	MO 64724-0098	Region 1	Facility Number	15005
COUNTRYSIDE HOME, LLC				
24499 PARK DR		Telephone (417) 532-7418	Alzheimer's Unit	No
LEBANON	MO 65536-5843	Level of Care: RCF	Bed Capacity	20
Mailing Address 24499 PARK DR		County LACLEDE	DMH Licensed	Yes
LEBANON	MO 65536-5843	Region 1	Facility Number	15052
CD AD ADDI E VII I ACE CENIOD				
CRAB APPLE VILLAGE SENIOR 214 HARTMAN PL, SUITE 100	ESTATES	Telephone (636) 629-6161	Alzheimer's Unit	Yes
SAINT CLAIR	MO 63077-2458	Level of Care: ALF**	Bed Capacity	65
Mailing Address 214 HARTMAN PL		County FRANKLIN	DMH Licensed	No
SAINT CLAIR	MO 63077-2458	Region 6	Facility Number	24395
DIMIT CLIM	110 03077 2130	Region 0	ruemey rumoer	24373
CRANE RESIDENTIAL CARE HO	ME			
102 LILLIAN		Telephone (417) 723-5900	Alzheimer's Unit	No
CRANE	MO 65633-9103	Level of Care: RCF	Bed Capacity	36
Mailing Address 102 LILLIAN		County STONE	DMH Licensed	Yes
CRANE	MO 65633-9103	Region 1	Facility Number	01898
CRAWFORD RANCH BOARDING	HOME, LLC			
2200 VARVERA RD	•	Telephone (573) 756-4656	Alzheimer's Unit	No
DOE RUN	MO 63637-3121	Level of Care: RCF*	Bed Capacity	32
Mailing Address 2200 VARVERA R	D	County SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN	MO 63637-3121	Region 2	Facility Number	13193

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CRESTVIEW HOME				
1313 SOUTH 25TH ST		Telephone (660) 425-3128	Alzheimer's Unit	No
BETHANY	MO 64424-2634	Level of Care: SNF	Bed Capacity	92
Mailing Address PO BOX 430		County HARRISON	DMH Licensed	No
BETHANY	MO 64424-0430	Region 4 Medicare/Medicaid	Facility Number	01936
ODEODWOOD HEALTH CARE OF	AMBED II C			
CRESTWOOD HEALTH CARE CEN	NIER, LLC	T-l (214) 741 2525	A 1-1	No
	MO (2022 7204	Telephone (314) 741-3525	Alzheimer's Unit	No
FLORISSANT	MO 63033-7204	Level of Care: SNF	Bed Capacity	150
Mailing Address 11400 MEHL AVE	MO (2022 7204	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-7204	Region 7 Medicare/Medicaid	Facility Number	14296
CREVE COEUR ASSISTED LIVING	S AND MEMORY CARE			
693 DECKER LN		Telephone (314) 997-4532	Alzheimer's Unit	Yes
CREVE COEUR	MO 63141-7127	Level of Care: ALF**	Bed Capacity	110
Mailing Address 693 DECKER LANE		County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63141-7127	Region 7	Facility Number	29440
CREVE COLOR	1410 03141 7127	Region /	racinty runnocr	23440
CREVE COEUR MANOR				
1127 TIMBER RUN DR		Telephone (314) 434-8361	Alzheimer's Unit	No
SAINT LOUIS	MO 63146-4482	Level of Care: SNF	Bed Capacity	149
Mailing Address 1127 TIMBER RUN	DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63146-4482	Region 7 Medicare/Medicaid	Facility Number	02417
CROSS CREEK AT LEE'S SUMMIT				
CROSS CREEK AT LEE'S SUMMIT 3320 NE WILSHIRE DR	,	Telephone (816) 607-5700	Alzheimer's Unit	Yes
	MO 64064-2077	Telephone (816) 607-5700 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 55
3320 NE WILSHIRE DR	MO 64064-2077	• '		
3320 NE WILSHIRE DR LEE'S SUMMIT	MO 64064-2077	Level of Care: ALF**	Bed Capacity	55
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT	MO 64064-2077 DR MO 64064-2077	Level of Care: ALF** County JACKSON	Bed Capacity DMH Licensed	55 No
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER	MO 64064-2077 DR MO 64064-2077	Level of Care: ALF** County JACKSON Region 3	Bed Capacity DMH Licensed Facility Number	55 No 30996
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD	MO 64064-2077 DR MO 64064-2077	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	55 No 30996 Yes
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER	MO 64064-2077 DR MO 64064-2077	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	55 No 30996 Yes 90
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668	MO 64064-2077 DR MO 64064-2077 MO 63841-8684	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	55 No 30996 Yes 90 No
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER	MO 64064-2077 DR MO 64064-2077	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	55 No 30996 Yes 90
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	55 No 30996 Yes 90 No
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	55 No 30996 Yes 90 No
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	55 No 30996 Yes 90 No 12667
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	55 No 30996 Yes 90 No 12667
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM HARRISONVILLE	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	55 No 30996 Yes 90 No 12667
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM HARRISONVILLE Mailing Address 3001 EAST ELM	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER MO 64701-1196	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525 Level of Care: SNF County CASS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	55 No 30996 Yes 90 No 12667
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM HARRISONVILLE Mailing Address 3001 EAST ELM HARRISONVILLE CRYSTAL CREEK HEALTH AND I	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER MO 64701-1196 MO 64701-1196	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525 Level of Care: SNF County CASS Region 3 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	55 No 30996 Yes 90 No 12667 No 118 No 21031
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM HARRISONVILLE Mailing Address 3001 EAST ELM HARRISONVILLE CRYSTAL CREEK HEALTH AND I 250 NEW FLORISSANT RD SOUTH	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER MO 64701-1196 MO 64701-1196 REHABILITATION CENTER	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 838-2211	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	55 No 30996 Yes 90 No 12667 No 118 No 21031
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM HARRISONVILLE Mailing Address 3001 EAST ELM HARRISONVILLE CRYSTAL CREEK HEALTH AND IT 250 NEW FLORISSANT RD SOUTH FLORISSANT	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER MO 64701-1196 MO 64701-1196 REHABILITATION CENTER MO 63031-6716	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 838-2211 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	55 No 30996 Yes 90 No 12667 No 118 No 21031
3320 NE WILSHIRE DR LEE'S SUMMIT Mailing Address 3320 NE WILSHIRE LEE'S SUMMIT CROWLEY RIDGE CARE CENTER 1204 NORTH OUTER RD DEXTER Mailing Address PO BOX 668 DEXTER CROWN REHAB AND HEALTHCA 3001 EAST ELM HARRISONVILLE Mailing Address 3001 EAST ELM HARRISONVILLE CRYSTAL CREEK HEALTH AND I 250 NEW FLORISSANT RD SOUTH	MO 64064-2077 DR MO 64064-2077 MO 63841-8684 MO 63841-0668 RE CENTER MO 64701-1196 MO 64701-1196 REHABILITATION CENTER MO 63031-6716	Level of Care: ALF** County JACKSON Region 3 Telephone (573) 624-5557 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid Telephone (816) 380-6525 Level of Care: SNF County CASS Region 3 Medicare/Medicaid Telephone (314) 838-2211	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	55 No 30996 Yes 90 No 12667 No 118 No 21031

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CRYSTAL OAKS					
1500 CALVARY CHURCH RD		Telephone	(636) 933-1818	Alzheimer's Unit	Yes
	MO 63028-4125	Level of Care:	ALF**	Bed Capacity	60
Mailing Address 1500 CALVARY CHURO			FFERSON	DMH Licensed	No
o .	MO 63028-4125	Region 2	TERSON	Facility Number	99932
TESTOS	10 03020 4123	Region 2		Taciney Number	77732
CRYSTAL OAKS					
1500 CALVARY CHURCH RD		Telephone	(636) 933-1818	Alzheimer's Unit	Yes
FESTUS N	4O 63028-4125	Level of Care:	SNF	Bed Capacity	131
Mailing Address 1500 CALVARY CHURO	CH RD	County JEF	FFERSON	DMH Licensed	No
FESTUS M	MO 63028-4125	Region 2	Medicare/Medicaid	Facility Number	99932
CUBA MANOR, INC					
210 ELDON DR		Telephone	(573) 885-4500	Alzheimer's Unit	No
CUBA N	4O 65453-1642	Level of Care:	SNF	Bed Capacity	90
Mailing Address 210 ELDON DR		County CR	AWFORD	DMH Licensed	No
CUBA N	MO 65453-1642	Region 6	Medicare/Medicaid	Facility Number	21149
CURRENT RIVER NURSING CENTER	INC				
1015 NORTH GRAND AVE	, 1.0	Telephone	(573) 996-4239	Alzheimer's Unit	NO
	4O 63935-1779	Level of Care:	SNF	Bed Capacity	120
Mailing Address 1015 NORTH GRAND A	AVE	County RIF	PLEY	DMH Licensed	No
_	MO 63935-1779	Region 2	Medicare/Medicaid	Facility Number	17125
CYPRESS POINT - SKILLED NURSING	G RY AMERICARE				
801 BAILIFF DR	<i>2</i> 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Telephone	(573) 624-8908	Alzheimer's Unit	No
	4O 63841-9500	Level of Care:	SNF	Bed Capacity	79
Mailing Address 801 BAILIFF DR		County ST	ODDARD	DMH Licensed	No
DEXTER M	4O 63841-9500	Region 2	Medicare/Medicaid	Facility Number	08315
DAVIESS COUNTY NURSING AND RE	CHABILITATION				
1337 WEST GRAND		Telephone	(660) 663-2197	Alzheimer's Unit	Yes
GALLATIN M	4O 64640-8320	Level of Care:	SNF	Bed Capacity	97
Mailing Address 1337 WEST GRAND		County DA	VIESS	DMH Licensed	No
GALLATIN M	4O 64640-8320	Region 4	Medicare/Medicaid	Facility Number	02032
DAYBREAK NURSING CENTER					
410 H ROAD		Telephone	(573) 471-7683	Alzheimer's Unit	No
SIKESTON M	4O 63801-5350	Level of Care:	SNF	Bed Capacity	70
Mailing Address 410 H ROAD		County SC	OTT	DMH Licensed	No
SIKESTON N	4O 63801-0430	Region 2	Medicare/Medicaid	Facility Number	11496
DELHAVEN MANOR					
5460 DELMAR BLVD		Telephone	(314) 361-2902	Alzheimer's Unit	No
SAINT LOUIS N	4O 63112-3104	Level of Care:	SNF	Bed Capacity	156
Mailing Address 5460 DELMAR BLVD		County SA	INT LOUIS CITY	DMH Licensed	No
				T	

Region 7

Medicare/Medicaid

Facility Number

02089

MO 63112-3104

SAINT LOUIS

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DELMAR GARDENS NORTH			
4401 PARKER ROAD	Telephone (314) 355-1516	Alzheimer's Unit	Yes
BLACK JACK MO 63033-4266	Level of Care: SNF	Bed Capacity	240
Mailing Address 4401 PARKER ROAD	County SAINT LOUIS COUNTY	DMH Licensed	No
BLACK JACK MO 63033-4266	Region 7 Medicare/Medicaid	Facility Number	14093
DELMAR GARDENS OF CHESTERFIELD			
14855 NORTH OUTER 40 RD	Telephone (636) 532-0150	Alzheimer's Unit	Yes
CHESTERFIELD MO 63017-2026	Level of Care: SNF	Bed Capacity	237
Mailing Address 14855 NORTH OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD MO 63017-2026	Region 7 Medicare/Medicaid	Facility Number	02111
	, , , , , , , , , , , , , , , , , , , ,	·	
DELMAR GARDENS OF CREVE COEUR			
850 COUNTRY MANOR LN	Telephone (314) 434-5900	Alzheimer's Unit	No
CREVE COEUR MO 63141-6651	Level of Care: SNF	Bed Capacity	148
Mailing Address 850 COUNTRY MANOR LN	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR MO 63141-6651	Region 7 Medicare/Medicaid	Facility Number	01830
DELMAR GARDENS OF MERAMEC VALLEY			
1 ARBOR TERRACE	Telephone (636) 343-0016	Alzheimer's Unit	Yes
FENTON MO 63026-3900	Level of Care: SNF	Bed Capacity	190
Mailing Address 1 ARBOR TERRACE	County SAINT LOUIS COUNTY	DMH Licensed	No
FENTON MO 63026-3900	Region 7 Medicare/Medicaid	Facility Number	13468
	•		
DELMAR GARDENS OF O'FALLON			
7068 SOUTH OUTER 364	Telephone (636) 240-6100	Alzheimer's Unit	Yes
O'FALLON MO 63368-7757	Level of Care: SNF	Bed Capacity	240
Mailing Address 7068 SOUTH OUTER 364	County SAINT CHARLES	DMH Licensed	No
O'FALLON MO 63368-7757	Region 5 Medicare/Medicaid	Facility Number	24291
DELMAR GARDENS ON THE GREEN			
15197 CLAYTON RD	Telephone (636) 394-7515	Alzheimer's Unit	No
CHESTERFIELD MO 63017-7048	Level of Care: SNF	Bed Capacity	180
Mailing Address 15197 CLAYTON RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD MO 63017-7048	Region 7 Medicare/Medicaid	Facility Number	01515
	Ç		
DELMAR GARDENS SOUTH			
5300 BUTLER HILL ROAD	Telephone (314) 842-0588	Alzheimer's Unit	Yes
SAINT LOUIS MO 63128-4152	Level of Care: SNF	Bed Capacity	250
Mailing Address 5300 BUTLER HILL RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63128-4152	Region 7 Medicare/Medicaid	Facility Number	12909
DELMAR GARDENS WEST			
13550 SOUTH OUTER 40 RD	Telephone (314) 878-1330	Alzheimer's Unit	No
TOWN AND COUNTRY MO 63017-5812	Level of Care: SNF	Bed Capacity	321
Mailing Address 13550 SOUTH OUTER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY MO 63017-5812	Region 7 Medicare/Medicaid	Facility Number	02120

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DELTA SOUTH NURSING & REHABILITATION	
640 COLONEL GEORGE E DAY PARKWAY	Telephone (573) 471-3400 Alzheimer's Unit No
SIKESTON MO 63801-0624	Level of Care: SNF Bed Capacity 60
Mailing Address 640 COLONEL GEORGE E DAY PARKWAY	County NEW MADRID DMH Licensed No
SIKESTON MO 63801-0624	Region 2 Medicare/Medicaid Facility Number 30584
DESMET RETIREMENT COMMUNITY	
1425 NORTH NEW FLORISSANT RD	Telephone (314) 838-3811 Alzheimer's Unit No
FLORISSANT MO 63033-2154	Level of Care: ALF** Bed Capacity 68
Mailing Address 1425 N NEW FLORISSANT RD	County SAINT LOUIS COUNTY DMH Licensed No
FLORISSANT MO 63033-2154	·
PLORISSAN1 MIO 03035-2134	Region 7 Facility Number 20664
DEXTER LIVING CENTER	TEMPORARY CLOSURE - STAFFING
415 S CATALPA STREET	Telephone (573) 624-7491 Alzheimer's Unit No
	•
DEXTER MO 63841-2017	Level of Care: SNF Bed Capacity 73
Mailing Address 415 S CATALPA STREET	County STODDARD DMH Licensed No
DEXTER MO 63841-2017	Region 2 Medicare/Medicaid Facility Number 02156
DIANA'S BOARDING HOME 1, INC	
15431 STATE HIGHWAY M	Telephone (573) 866-2010 Alzheimer's Unit No
	•
MARBLE HILL MO 63764-7487	Level of Care: RCF Bed Capacity 20
Mailing Address 15431 STATE HIGHWAY M	County BOLLINGER DMH Licensed Yes
MARBLE HILL MO 63764-7487	Region 2 Facility Number 11123
DIANA'S BOARDING HOME 2	
25140 BUZZARD DR	Telephone (573) 238-3344 Alzheimer's Unit No
MARBLE HILL MO 63764-9408	Level of Care: RCF Bed Capacity 40
Mailing Address HC 64, BOX 4677	•
MARBLE HILL MO 63764-9408	Region 2 Facility Number 23940
DIXON NURSING & REHAB	
403 EAST 10TH ST	Telephone (573) 759-2135 Alzheimer's Unit No
DIXON MO 65459-6049	Level of Care: SNF Bed Capacity 60
Mailing Address 403 EAST 10TH ST	County PULASKI DMH Licensed No
DIXON MO 65459-6049	
DIAON 1910 03437-0047	Region 6 Medicare/Medicaid Facility Number 15510
DOLAN MEMORY CARE AT CALAIS	
1225 TENNANT RD	Telephone (314) 569-9060 Alzheimer's Unit Yes
SAINT LOUIS MO 63146-5523	Level of Care: ALF** Bed Capacity 44
Mailing Address 1225 TENNANT RD	County SAINT LOUIS COUNTY DMH Licensed No
SAINT LOUIS MO 63146-5523	Region 7 Facility Number 27755
3.11.1 20010 1100 03140 0323	Region / Lacing Number 27755
DOLAN MEMORY CARE AT CONWAY	
12550 CONWAY RD	Telephone (314) 576-3998 Alzheimer's Unit Yes
CREVE COEUR MO 63141-8613	Level of Care: ALF** Bed Capacity 9
Mailing Address 12550 CONWAY RD	County SAINT LOUIS COUNTY DMH Licensed No
CREVE COEUR MO 63141-8613	Region 7 Facility Number 22648

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DOLAN MEMORY CARE AT FROM	TIER		
11566 FRONTIER DR		Telephone (314) 995-5331	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-4873	Level of Care: ALF**	Bed Capacity 20
Mailing Address PO BOX 4082		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63006-4082	Region 7	Facility Number 25162
DOLAN MEMORY CARE AT MASO	ON MANOD		
12740 MASON MANOR	ON MANOR	T-1	Alzheimer's Unit Yes
SAINT LOUIS	MO 63141-7350	Telephone (314) 576-6200 Level of Care: ALF**	
Mailing Address 12740 MASON MAN SAINT LOUIS	MO 63141-7350		
SAINT LOUIS	MO 63141-7350	Region 7	Facility Number 19861
DOLAN MEMORY CARE AT SCHU	ETZ		
1706 SCHUETZ RD		Telephone (314) 989-1762	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-4931	Level of Care: ALF**	Bed Capacity 10
Mailing Address 1706 SCHUETZ RD		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63146-4931	Region 7	Facility Number 23805
DOLAN MEMORY CARE AT WATI	ERFORD CROSSING		
11350 DOLAN WAY		Telephone (314) 993-9500	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-5533	Level of Care: ALF**	Bed Capacity 88
Mailing Address PO BOX 4082		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63006-4082	Region 7	Facility Number 31366
	IVING & MEMODY CADE		
DOUGHERTY FERRY ASSISTED L 2929 DOUGHERTY FERRY RD	IVING & MEMORY CARE	Telephone (626) 925 6665	Alahaiman'a Unit Vas
SAINT LOUIS	MO (2122 2269	Telephone (636) 825-6665 Level of Care: ALF**	Alzheimer's Unit Yes
	MO 63122-3368		Bed Capacity 110 DMH Licensed No
Mailing Address 2929 DOUGHERTY		County SAINT LOUIS COUNTY	
SAINT LOUIS	MO 63122-3368	Region 7	Facility Number 30034
DUNN-DUNN HOUSE LLC			
2133 JANNETTE DR		Telephone (314) 869-2431	Alzheimer's Unit No
SAINT LOUIS	MO 63136-4020	Level of Care: RCF	Bed Capacity 10
Mailing Address 2133 JANNETTE DR		County SAINT LOUIS COUNTY	DMH Licensed Yes
SAINT LOUIS	MO 63136-4020	Region 7	Facility Number 14694
DUTCHTOWN CARE CENTER			
3421 GASCONADE ST		Telephone (314) 832-4700	Alzheimer's Unit No
SAINT LOUIS	MO 63118-4201	Level of Care: SNF	Bed Capacity 120
Mailing Address 3421 GASCONADE	ST	County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63118-4201	Region 7 Medicare/Medicaid	Facility Number 21455
		5	. == 700
E M THOMBOON HEAT BY O PER	ADII ITATION CENTER		
E W THOMPSON HEALTH & REH	ADILITATION CENTER	Tolophono (660) 951 0669	Alzheimen's Unit
975 MITCHELL ROAD	MO 65201 2122	Telephone (660) 851-0668 Level of Care: SNF	Alzheimer's Unit Yes Pod Connective 60
SEDALIA Molling Address 075 MITCHELL BOX	MO 65301-2133		Bed Capacity 60
Mailing Address 975 MITCHELL ROA SEDALIA		County PETTIS	DMH Licensed No
SHI1/11/1/	MO 65301-2133	Region 6 Medicare/Medicaid	Facility Number 30182

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EASTVIEW MANOR CARE CENTER	R		
1622 EAST 28TH ST		Telephone (660) 359-2251	Alzheimer's Unit No
TRENTON	MO 64683-1104	Level of Care: SNF	Bed Capacity 90
Mailing Address 1622 EAST 28TH ST		County GRUNDY	DMH Licensed No
TRENTON	MO 64683-1104	Region 4 Medicare/Medicaid	Facility Number 18267
EDGEWOOD MANOR HEALTH CAI	DE CENTED		
11900 JESSICA LN	RE CEIVIER	Telephone (816) 358-7858	Alzheimer's Unit No
RAYTOWN	MO 64138-2649	Level of Care: SNF	Bed Capacity 66
Mailing Address 11900 JESSICA LN	110 01130 2019	County JACKSON	DMH Licensed No
RAYTOWN	MO 64138-2649	Region 3 Medicare/Medicaid	Facility Number 14119
			•
EL DORADO SPRINGS RESIDENTIA	AL CARE		
805 NORTH JACKSON ST		Telephone (417) 876-4278	Alzheimer's Unit No
EL DORADO SPRINGS	MO 64744-2912	Level of Care: RCF	Bed Capacity 60
Mailing Address 805 NORTH JACKSO	N ST	County CEDAR	DMH Licensed Yes
EL DORADO SPRINGS	MO 64744-2912	Region 1	Facility Number 12621
ELDON NURSING & REHAB			
1001 E NORTH ST		Telephone (573) 392-3164	Alzheimer's Unit Yes
ELDON	MO 65026-2634	Level of Care: SNF	Bed Capacity 90
Mailing Address 1001 E NORTH ST	WO 03020-2034	County MILLER	DMH Licensed No
ELDON	MO 65026-2634	-	Facility Number 06139
LLDON	WIO 03020-2034	Region 6 Medicare/Medicaid	racinty Number 00139
ELIZABETH HOUSE			
12284 DE PAUL DR		Telephone (314) 209-8814	Alzheimer's Unit No
BRIDGETON	MO 63044-2508	Level of Care: SNF	Bed Capacity 54
Mailing Address 12284 DE PAUL DR		County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON	MO 63044-2508	Region 7	Facility Number 22316
ELSBERRY MISSOURI HEALTH CA	DE CENTED		
1827 HIGHWAY B	RE CENTER	Telephone (573) 898-2880	Alzheimer's Unit NO
ELSBERRY	MO 63343-3126	Level of Care: ALF**	Bed Capacity 12
Mailing Address 1827 HIGHWAY B	110 03343 3120	County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-3126	Region 5	Facility Number 02336
EDD EARLY		Region 5	1 ucinty 1 (uni
ELSBERRY MISSOURI HEALTH CA	ARE CENTER		
1827 HIGHWAY B		Telephone (573) 898-2880	Alzheimer's Unit No
ELSBERRY	MO 63343-3126	Level of Care: SNF	Bed Capacity 56
Mailing Address 1827 HWY B		County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-3126	Region 5 Medicare/Medicaid	Facility Number 02336
EQUILIBRIUM RANCH			
81 PILKENTON LN		Telephone (573) 885-6443	Alzheimer's Unit No
CUBA	MO 65453-8136	Level of Care: RCF	Bed Capacity 18
Mailing Address 81 PILKENTON LN		County CRAWFORD	DMH Licensed No
CUBA	MO 65453-8136	Region 6	Facility Number 15026
		•	•

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ESSEX BY BRISTOL, THE 301 EAST 3RD		Telephone (660) 829-1758	Alzheimer's Unit	No
SEDALIA	MO 65301-4335	Level of Care: RCF	Bed Capacity	24
Mailing Address 301 EAST 3RD	332 3331 1333	County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-4335	Region 6	Facility Number	23020
		8	•	
ESSEX OF CONCORDIA, THE				
402 REDBUD		Telephone (660) 463-0200	Alzheimer's Unit	No
CONCORDIA	MO 64020-8358	Level of Care: RCF	Bed Capacity	12
Mailing Address 402 REDBUD		County LAFAYETTE	DMH Licensed	No
CONCORDIA	MO 64020-8358	Region 3	Facility Number	24461
ESSEX OF GRAIN VALLEY, THE 401 SOUTHWEST ROCK CREEK LN		Telephone (816) 443-3992	Alzheimer's Unit	No
GRAIN VALLEY	MO 64029-8460	Level of Care: RCF	Bed Capacity	12
Mailing Address 401 SOUTHWEST RO		County JACKSON	DMH Licensed	No
GRAIN VALLEY	MO 64029-8460	Region 3	Facility Number	24475
		Region 5		21173
ESSEX OF LEBANON, THE				
1316 DEADRA DR		Telephone (417) 532-4863	Alzheimer's Unit	No
LEBANON	MO 65536-4609	Level of Care: RCF	Bed Capacity	12
Mailing Address 1316 DEADRA DR		County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-4609	Region 1	Facility Number	24257
EGGEV OF MEVICO THE				
ESSEX OF MEXICO, THE		Talanhana (572) 591 5222	Alabaiman'a Unit	No
1109 OLD FARM RD WEST MEXICO	MO 65265-3250	Telephone (573) 581-5223 Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 12
Mailing Address 1109 OLD FARM RD		County AUDRAIN	DMH Licensed	No
MEXICO	· WEST	County		
	MO 65265-3250	Pagion 5	Facility Number	24425
MEXICO	MO 65265-3250	Region 5	Facility Number	24425
ESSEX OF OZARK, THE	MO 65265-3250	Region 5	Facility Number	24425
	MO 65265-3250	Telephone (417) 485-4185	Alzheimer's Unit	24425 No
ESSEX OF OZARK, THE	MO 65265-3250 MO 65721-7637	Ü	·	
ESSEX OF OZARK, THE 5173 NORTH 22ND		Telephone (417) 485-4185	Alzheimer's Unit	No
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK		Telephone (417) 485-4185 Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 12
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK	MO 65721-7637	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN	Alzheimer's Unit Bed Capacity DMH Licensed	No 12 No
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE	MO 65721-7637	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 24318
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR	MO 65721-7637 MO 65721-7637	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 24318
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS	MO 65721-7637 MO 65721-7637 MO 63138-1757	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 12 No 24318 No 38
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS Mailing Address 11728 HIDDEN LAK	MO 65721-7637 MO 65721-7637 MO 63138-1757 E DR	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 12 No 24318 No 38 No
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS	MO 65721-7637 MO 65721-7637 MO 63138-1757	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 12 No 24318 No 38
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS Mailing Address 11728 HIDDEN LAK	MO 65721-7637 MO 65721-7637 MO 63138-1757 E DR	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 12 No 24318 No 38 No
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS Mailing Address 11728 HIDDEN LAK SAINT LOUIS	MO 65721-7637 MO 65721-7637 MO 63138-1757 E DR	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 12 No 24318 No 38 No
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS Mailing Address 11728 HIDDEN LAK SAINT LOUIS ESTATES OF HIDDEN LAKE THE	MO 65721-7637 MO 65721-7637 MO 63138-1757 E DR	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY Region 7	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 24318 No 38 No 18442
ESSEX OF OZARK, THE 5173 NORTH 22ND OZARK Mailing Address 5173 NORTH 22ND OZARK ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE DR SAINT LOUIS Mailing Address 11728 HIDDEN LAK SAINT LOUIS ESTATES OF HIDDEN LAKE THE 11728 HIDDEN LAKE THE	MO 65721-7637 MO 65721-7637 MO 63138-1757 E DR MO 63138-1757	Telephone (417) 485-4185 Level of Care: RCF County CHRISTIAN Region 1 Telephone (314) 355-8833 Level of Care: ALF County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-8833	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 24318 No 38 No 18442

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ESTATES OF HIDDEN LAKE THE				
11728 HIDDEN LAKE DR		Telephone (314) 355-8833	Alzheimer's Unit N	
SAINT LOUIS	MO 63138-1757	Level of Care: ALF**		38
Mailing Address 11728 HIDDEN LAK		County SAINT LOUIS COUNTY		lo
SAINT LOUIS	MO 63138-1757	Region 7	Facility Number 1844	-2
ESTATES OF PERRYVILLE, LLC,	ГНЕ			
430 NORTH WEST ST		Telephone (573) 547-1011	Alzheimer's Unit N	
PERRYVILLE	MO 63775-1359	Level of Care: SNF	Bed Capacity 15	
Mailing Address 430 NORTH WEST S		County PERRY		lo
PERRYVILLE	MO 63775-1359	Region 2 Medicare/Medicaid	Facility Number 0013	,7
ESTATES OF SPANISH LAKE, THE		T. I. I. (214) 741 0202	A11 ' LTI '	T
610 PRIGGE ROAD	MO (2129 2542	Telephone (314) 741-9393	Alzheimer's Unit N	
SAINT LOUIS	MO 63138-3543	Level of Care: SNF	Bed Capacity 15 DMH Licensed N	
Mailing Address 610 PRIGGE ROAD	MO (2129 2542	County SAINT LOUIS COUNTY		lo
SAINT LOUIS	MO 63138-3543	Region 7 Medicare/Medicaid	Facility Number 1526	15
ESTATES OF ST LOUIS, LLC, THE				
2115 KAPPEL DR		Telephone (314) 867-7474	Alzheimer's Unit N	lo
SAINT LOUIS	MO 63136-4115	Level of Care: SNF		94
Mailing Address 2115 KAPPEL DR	110 03130 1113	County SAINT LOUIS COUNTY	=	lo
SAINT LOUIS	MO 63136-4115	Region 7 Medicare/Medicaid	Facility Number 0534	
Simil Eddis	1410 03130 1113	Region / Medicale/Medicald	racinty runner 0554	.0
FAIR VIEW NURSING HOME				
1714 WEST 16TH ST		Telephone (660) 827-1594	Alzheimer's Unit N	О
SEDALIA	MO 65301-5273	Level of Care: SNF	Bed Capacity 7	75
Mailing Address 1714 WEST 16TH ST	· ·	County PETTIS	DMH Licensed N	lo
SEDALIA	MO 65301-5273	Region 6 Medicare/Medicaid	Facility Number 0246	i 9
FAIRMONT ON CLAYTON				
7920 CLAYTON ROAD		Telephone (314) 646-7600	Alzheimer's Unit Ye	
RICHMOND HEIGHTS	MO 63117-1327	Level of Care: ICF		90
Mailing Address 7920 CLAYTON RO.		County SAINT LOUIS COUNTY		lo 10
RICHMOND HEIGHTS	MO 63117-1327	Region 7	Facility Number 2414	.9
FAMILY COUNSELING CENTER II	NC			
18408 WAYNE ROUTE D	- · -	Telephone (573) 222-8676	Alzheimer's Unit N	lo
WAPPAPELLO	MO 63966-	Level of Care: RCF*		27
Mailing Address 18408 WAYNE ROU		County WAYNE	DMH Licensed Ye	
WAPPAPELLO	MO 63966-	Region 2	Facility Number 2358	
	- 00700			•
FAMILY PARTNERS HOME LLC				
232 CREVE COEUR AVE		Telephone (314) 686-4468	Alzheimer's Unit Ye	es
SAINT LOUIS	MO 63011-4040	Level of Care: ALF**	Bed Capacity	8
Mailing Address 12882 MANCHESTE	R RD STE 201	County SAINT LOUIS COUNTY	DMH Licensed N	lo
SAINT LOUIS	MO 63131-1803	Region 7	Facility Number 3049	2

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FAMILY PARTNERS MANCHESTER,	LLC		
351 FOREST SUMMIT COURT		Telephone (314) 686-4468	Alzheimer's Unit Yes
	MO 63021-5509	Level of Care: ALF**	Bed Capacity 12
Mailing Address 351 FOREST SUMMIT		County SAINT LOUIS COUNTY	DMH Licensed No
MANCHESTER I	MO 63021-5509	Region 7	Facility Number 32473
FARMINGTON MANOR			
2879 US HIGHWAY 67		Telephone (573) 756-7566	Alzheimer's Unit No
FARMINGTON	MO 63640-9168	Level of Care: ALF	Bed Capacity 70
Mailing Address 2879 US HWY 67		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON I	MO 63640-9168	Region 2	Facility Number 15140
EADAWGEON BREGRYEENAN MAAN	von.		
FARMINGTON PRESBYTERIAN MAN	NOR	T 1 1 (572) 757 (777)	A11.
500 CAYCE ST	MO (2640 2010	Telephone (573) 756-6768	Alzheimer's Unit Yes
	MO 63640-2910	Level of Care: SNF	Bed Capacity 90
Mailing Address 500 CAYCE ST	MO (2640 2010	County SAINT FRANCOIS	DMH Licensed No
FARMINGTON I	MO 63640-2910	Region 2 Medicare/Medicaid	Facility Number 06181
FARMINGTON PRESBYTERIAN MAN	NOR		
500 CAYCE ST		Telephone (573) 756-6768	Alzheimer's Unit No
FARMINGTON	MO 63640-2910	Level of Care: ALF	Bed Capacity 60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-2910	Region 2	Facility Number 06181
FARMINGTON PRESBYTERIAN MAN	NOR		
500 CAYCE ST		Telephone (573) 756-6768	Alzheimer's Unit No
	MO 63640-2910	Level of Care: RCF	Bed Capacity 60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed No
•	MO 63640-2910	Region 2	Facility Number 06181
			00101
FERNDALE, INC			
15677 COUNTY RD 2430		Telephone (573) 265-3344	Alzheimer's Unit No
	MO 65559-8210	Level of Care: ALF	Bed Capacity 32
Mailing Address 15677 COUNTY RD 24		County PHELPS	DMH Licensed Yes
SAINT JAMES	MO 65559-8210	Region 6	Facility Number 02526
FESTUS MANOR			
627 WESTWOOD DR S		Telephone (636) 931-9066	Alzheimer's Unit No
FESTUS	MO 63028-2062	Level of Care: SNF	Bed Capacity 150
Mailing Address 627 WESTWOOD DR S	S	County JEFFERSON	DMH Licensed No
•	MO 63028-2062	Region 2 Medicare/Medicaid	Facility Number 02546
EIEI D BOINNE A GGIGNER A WAY C P	VAMEDICADE		
FIELD POINTE ASSISTED LIVING BY	Y AMERICARE	Tolonhono (017) 500 4001	Alabaimant- II!4
5002 GENE FIELD ROAD	MO 64506 2056	Telephone (816) 688-4001	Alzheimer's Unit Yes Ped Capacity 65
	MO 64506-2056	Level of Care: ALF**	Bed Capacity 65
Mailing Address 5002 GENE FIELD ROA		County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-2056	Region 4	Facility Number 32538

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FIESER NURSING CENTER			
404 MAIN ST		Telephone (636) 343-4344	Alzheimer's Unit No
FENTON	MO 63026-4107	Level of Care: SNF	Bed Capacity 60
Mailing Address 404 MAIN ST		County SAINT LOUIS COUNTY	DMH Licensed No
FENTON	MO 63026-4107	Region 7 Medicaid	Facility Number 02569
FLORISSANT VALLEY HEALTH &	REHABILITATION CENTER		
1200 GRAHAM RD	150 (2004 0045	Telephone (314) 838-6555	Alzheimer's Unit No
FLORISSANT	MO 63031-8015	Level of Care: SNF	Bed Capacity 98
Mailing Address 1200 GRAHAM RD		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63031-8015	Region 7 Medicare/Medicaid	Facility Number 00154
FORSYTH CARE CENTER			
477 COY BLVD		Telephone (417) 546-6337	Alzheimer's Unit No
FORSYTH	MO 65653-5132	Level of Care: SNF	Bed Capacity 120
	WIO 03033-3132		• •
Mailing Address PO BOX 640	MO (5(52.0(40	County TANEY	
FORSYTH	MO 65653-0640	Region 1 Medicare/Medicaid	Facility Number 18870
FOUNTAINBLEAU LODGE			
2001 NORTH KINGSHIGHWAY		Telephone (573) 335-1999	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: ALF	Bed Capacity 56
Mailing Address 2001 NORTH KINGS	HIGHWAY	County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-2193	Region 2	Facility Number 12751
	1.20 00101 2170	region 2	Taciney (valide)
FOUNTAINBLEAU LODGE			
2001 NORTH KINGSHIGHWAY		Telephone (573) 335-1999	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: SNF	Bed Capacity 33
Mailing Address 2001 NORTH KINGS	HIGHWAY	County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-2193	Region 2 Medicare/Medicaid	Facility Number 12751
FOUNTAINBLEAU NURSING CENT	re r		
1349 HIGHWAY 61		Telephone (636) 937-3500	Alzheimer's Unit No
FESTUS	MO 63028-4107	Level of Care: SNF	Bed Capacity 106
Mailing Address PO BOX 700	110 03020 4107	County JEFFERSON	DMH Licensed No
FESTUS	MO 63028-0700		Facility Number 17080
1123103	WO 03028-0700	Region 2 Medicare/Medicaid	racinty Number 17000
FOUNTAINS OF WEST COUNTY A	L, LLC THE		
15822 CLAYTON RD		Telephone (636) 220-1660	Alzheimer's Unit Yes
ELLISVILLE	MO 63011-2240	Level of Care: ALF**	Bed Capacity 80
Mailing Address 15822 CLAYTON RD)	County SAINT LOUIS COUNTY	DMH Licensed No
ELLISVILLE	MO 63011-2240	Region 7	Facility Number 29435
EOUD CEACONG ACCICTED I MINO	•		
FOUR SEASONS ASSISTED LIVING 230 RAILROAD ST	T	Telephone (636) 366-4231	Alzheimer's Unit No
MOSCOW MILLS	MO 63362-1600	Level of Care: ALF	Bed Capacity 30
	1410 03302-1000		
Mailing Address 230 RAILROAD ST	MO 62262 1600	·	
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number 02624

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FOUR SEASONS LIVING CENTER			
2800 HIGHWAY TT		Telephone (660) 826-8803	Alzheimer's Unit Yes
SEDALIA	MO 65301-1410	Level of Care: SNF	Bed Capacity 239
Mailing Address 2800 HIGHWAY TT		County PETTIS	DMH Licensed No
SEDALIA	MO 65301-1410	Region 6 Medicare/Medicaid	Facility Number 00836
FOUR SEASONS RCF I			
220 RAILROAD ST		Telephone (636) 366-4231	Alzheimer's Unit No
MOSCOW MILLS	MO 63362-1600	Level of Care: RCF	Bed Capacity 23
Mailing Address 230 RAILROAD ST	110 03302 1000	County LINCOLN	DMH Licensed Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number 02624
			02021
EAVDEDDY TEDDACE ACCICTED	I IVING DV AMEDICADE		
FOXBERRY TERRACE - ASSISTED 4316 NORTH ST LOUIS AVE	LIVING BY AMERICARE	Telephone (417) 625-1000	Alzheimer's Unit YES
WEBB CITY	MO 64870-9550	Level of Care: ALF**	Bed Capacity 46
Mailing Address 4316 NORTH ST LO		County JASPER	DMH Licensed No
WEBB CITY	MO 64870-9550	Region 1	Facility Number 25428
		Region 2	23420
FOXWOOD SPRINGS LIVING CEN	TED		
1500 WEST FOXWOOD DR	ILK	Telephone (816) 331-3111	Alzheimer's Unit Yes
RAYMORE	MO 64083-9347	Level of Care: SNF	Bed Capacity 108
Mailing Address 1500 WEST FOXWO		County CASS	DMH Licensed No
RAYMORE	MO 64083-9347	Region 3 Medicare/Medicaid	Facility Number 02649
		The content of the content of	,
FOXWOOD SPRINGS LIVING CEN	TER		
1500 WEST FOXWOOD DR		Telephone (816) 331-3111	Alzheimer's Unit No
RAYMORE	MO 64083-9347	Level of Care: ALF**	Bed Capacity 62
Mailing Address 1500 WEST FOXWO	OD DR	County CASS	DMH Licensed No
RAYMORE	MO 64083-9347	Region 3	Facility Number 02649
FREDERICK STREET MANOR			
429 NORTH FREDERICK STREET		Telephone (573) 334-0916	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-4834	Level of Care: RCF*	Bed Capacity 32
Mailing Address 429 NORTH FREDER	RICK STREET	County CAPE GIRARDEAU	DMH Licensed Yes
CAPE GIRARDEAU	MO 63701-4834	Region 2	Facility Number 02662
FREMONT SENIOR LIVING, THE			
1520 EAST BATES ST		Telephone (417) 881-0500	Alzheimer's Unit Yes
SPRINGFIELD	MO 65804-8401	Level of Care: ALF**	Bed Capacity 72
Mailing Address 1520 EAST BATES S	T	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65804-8401	Region 1	Facility Number 28782
FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE		
15250 VILLAGE VIEW DRIVE		Telephone (636) 733-0199	Alzheimer's Unit YES
CHESTERFIELD	MO 63017-1982	Level of Care: ALF**	Bed Capacity 66
Mailing Address 15250 VILLAGE VIE		County SAINT LOUIS COUNTY	DMH Licensed Yes
CHESTERFIELD	MO 63017-1982	Region 7	Facility Number 02715

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FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE			
12777 POINTE DR		Telephone (314) 270-7111	Alzheimer's Unit Y	l'es
SAINT LOUIS	MO 63127-1757	Level of Care: ALF**	Bed Capacity	84
Mailing Address 12777 POINTE DR		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1757	Region 7	Facility Number 027	03
FRIENDSHIP VILLAGE CHESTERI	FIELD			
15250 VILLAGE VIEW DRIVE		Telephone (636) 733-0199		No
CHESTERFIELD	MO 63017-1982	Level of Care: SNF		90
Mailing Address 15250 VILLAGE VIE		County SAINT LOUIS COUNTY		No
CHESTERFIELD	MO 63017-1982	Region 7 Medicare/Medicaid	Facility Number 027	15
FRIENDSHIP VILLAGE SUNSET H	шь			
12651 VILLAGE CIRCLE DR		Telephone (314) 270-7777	Alzheimer's Unit	No
SAINT LOUIS	MO 63127-1778	Level of Care: SNF		.44
Mailing Address 12651 VILLAGE CIR		County SAINT LOUIS COUNTY		No
SAINT LOUIS	MO 63127-1778	Region 7 Medicare/Medicaid	Facility Number 027	
SARVI ECCID	WO 03127 1770	Region / Wedicare/Medicard	Tacinty Number 027	03
FRONTIER HEALTH & REHABILI	TATION			
2840 WEST CLAY ST		Telephone (636) 946-6100	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2536	Level of Care: SNF	Bed Capacity 1	80
Mailing Address 2840 WEST CLAY S	Т	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2536	Region 5 Medicare/Medicaid	Facility Number 015	21
FULTON MANOR CARE CENTER				
520 MANOR DR		Telephone (573) 642-6834	Alzheimer's Unit	No
FULTON	MO 65251-2429	Level of Care: SNF		52
Mailing Address 520 MANOR DR	110 03231 2427	County CALLAWAY		No
FULTON	MO 65251-2429	Region 6 Medicare/Medicaid	Facility Number 027	
102101		region o medical confederation	Tuesday Tuesday 027	23
FULTON NURSING & REHAB				
1510 BLUFF ST		Telephone (573) 642-0202	Alzheimer's Unit Y	l'es
FULTON	MO 65251-2345	Level of Care: SNF	Bed Capacity 1	.00
Mailing Address 1510 BLUFF ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2345	Region 6 Medicare/Medicaid	Facility Number 034	.92
GABLES AT BRADY CIRCLE, LLC	ТНЕ			
11 BRADY CIRCLE		Telephone (314) 890-2230	Alzheimer's Unit	No
SAINT LOUIS	MO 63114-1110	Level of Care: ALF**		32
Mailing Address 11 BRADY CIRCLE		County SAINT LOUIS COUNTY		No
SAINT LOUIS	MO 63114-1110	Region 7	Facility Number 300	
2000			300	.0
GAINESVILLE HEALTH CARE CE	NTER			
77 MEDICAL DR		Telephone (417) 679-4921		No
GAINESVILLE	MO 65655-0628	Level of Care: SNF		99
Mailing Address PO BOX 628		County OZARK		No
GAINESVILLE	MO 65655-0628	Region 1 Medicare/Medicaid	Facility Number 128	68

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GAMMA ROAD LODGE				
250 E LOCUST		Telephone (573) 684-2002	Alzheimer's Unit	No
WELLSVILLE	MO 63384-1422	Level of Care: SNF	Bed Capacity	112
Mailing Address 250 E LOCUST		County MONTGOMERY	DMH Licensed	No
WELLSVILLE	MO 63384-1422	Region 6 Medicare/Medicaid	Facility Number	02740
		Tregion (Macunia)	•	
GARDEN PLAZA OF FLORISSANT				
1101 GARDEN PLAZA DR		Telephone (314) 831-0988	Alzheimer's Unit	Yes
FLORISSANT	MO 63033-2269	Level of Care: ALF**	Bed Capacity	102
Mailing Address 1101 GARDEN PLA	ZA DR	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-2269	Region 7	Facility Number	27826
GARDEN VIEW CARE CENTER				
700 GARDEN PATH		Telephone (636) 240-2840	Alzheimer's Unit	Yes
O'FALLON	MO 63366-3052	Level of Care: SNF	Bed Capacity	120
Mailing Address 700 GARDEN PATH		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-3052	Region 5 Medicare/Medicaid	Facility Number	13963
CARREN WEW CARE GENTER AS	DOLGHEDAY FEDDAY			
GARDEN VIEW CARE CENTER AT	DOUGHERTY FERRY	m 1 1 (626) 961 9599		37
13612 BIG BEND RD	MO (2000 1447	Telephone (636) 861-0500	Alzheimer's Unit	Yes
VALLEY PARK	MO 63088-1447	Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity	120 No.
Mailing Address 13612 BIG BEND RI VALLEY PARK	MO 63088-1447		DMH Licensed	No
VALLET FARK	WO 03000-1447	Region 7 Medicare/Medicaid	Facility Number	23101
GARDEN VIEW CARE CENTER OF	F CHESTERFIELD			
1025 CHESTERFIELD POINTE PRKW	ΥY	Telephone (636) 537-3333	Alzheimer's Unit	Yes
		• • •		1 03
CHESTERFIELD	MO 63017-1957	Level of Care: SNF	Bed Capacity	130
Mailing Address 1025 CHESTERFIEL		Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	
				130
Mailing Address 1025 CHESTERFIEL	D POINTE PRKWY	County SAINT LOUIS COUNTY	DMH Licensed	130 No
Mailing Address 1025 CHESTERFIEL CHESTERFIELD	D POINTE PRKWY	County SAINT LOUIS COUNTY	DMH Licensed	130 No
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS	D POINTE PRKWY	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	DMH Licensed Facility Number	130 No 16409
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD	D POINTE PRKWY MO 63017-1957 MO 63017-5823	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520	DMH Licensed Facility Number Alzheimer's Unit	130 No 16409
Mailing Address 1025 CHESTERFIELD CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY	D POINTE PRKWY MO 63017-1957 MO 63017-5823	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF**	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	130 No 16409 No 46
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	130 No 16409 No 46 No
Mailing Address 1025 CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTER	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	130 No 16409 No 46 No
Mailing Address 1025 CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY GARDEN VILLAS NORTH	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 16409 No 46 No 28978
Mailing Address 1025 CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTI TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD BLACK JACK	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100 Level of Care: ALF**	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 16409 No 46 No 28978
Mailing Address 1025 CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	130 No 16409 No 46 No 28978
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTI TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD BLACK JACK Mailing Address 4505 PARKER RD BLACK JACK	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823 MO 63033-4268	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100 Level of Care: ALF** County SAINT LOUIS COUNTY	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	130 No 16409 No 46 No 28978
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD BLACK JACK Mailing Address 4505 PARKER RD BLACK JACK GARDEN VILLAS OF O'FALLON	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823 MO 63033-4268	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 16409 No 46 No 28978 No 90 No 28930
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD BLACK JACK Mailing Address 4505 PARKER RD BLACK JACK GARDEN VILLAS OF O'FALLON 7092 SOUTH OUTER 364 ROAD	MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823 MO 63033-4268 MO 63033-4268	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 16409 No 46 No 28978 No 90 No 28930
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD BLACK JACK Mailing Address 4505 PARKER RD BLACK JACK GARDEN VILLAS OF O'FALLON 7092 SOUTH OUTER 364 ROAD O'FALLON	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823 MO 63033-4268 MO 63033-4268 MO 63368-7757	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 240-5560 Level of Care: ALF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 16409 No 46 No 28978 No 90 No 28930
Mailing Address 1025 CHESTERFIEL CHESTERFIELD GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY Mailing Address 13590 SOUTH OUTE TOWN AND COUNTRY GARDEN VILLAS NORTH 4505 PARKER ROAD BLACK JACK Mailing Address 4505 PARKER RD BLACK JACK GARDEN VILLAS OF O'FALLON 7092 SOUTH OUTER 364 ROAD	D POINTE PRKWY MO 63017-1957 MO 63017-5823 ER 40 RD MO 63017-5823 MO 63033-4268 MO 63033-4268 MO 63368-7757	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (314) 434-2520 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 355-6100 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 16409 No 46 No 28978 No 90 No 28930

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CARREN VIII I ACCOUNT				
GARDEN VILLAS SOUTH		T. 1 (211) 012 TT00		
13457 TESSON FERRY RD		Telephone (314) 843-7788	Alzheimer's Unit	No
SAINT LOUIS	MO 63128-4010	Level of Care: ALF	Bed Capacity	83
Mailing Address 13457 TESSON FER		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-4010	Region 7	Facility Number	28964
GARDENS AT BARRY ROAD, THE				
8300 NW BARRY ROAD		Telephone (816) 584-3200	Alzheimer's Unit	No
KANSAS CITY	MO 64153-1634	Level of Care: ALF	Bed Capacity	100
Mailing Address 8300 NW BARRY RI)	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64153-1634	Region 4	Facility Number	23774
GARDENS AT BARRY ROAD, THE				
8300 NW BARRY RD		Telephone (816) 584-3200	Alzheimer's Unit	Yes
KANSAS CITY	MO 64153-1634	Level of Care: ALF**	Bed Capacity	40
Mailing Address 8300 NW BARRY RI		County PLATTE	DMH Licensed	No
KANSAS CITY		·		
KANSAS CITT	MO 64153-1634	Region 4	Facility Number	23774
GARDENS, THE				
1302 WEST SUNSET		Telephone (417) 889-7600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65807-5943	Level of Care: ALF**	Bed Capacity	148
Mailing Address 1302 WEST SUNSET			DMH Licensed	No
SPRINGFIELD	MO 65807-5943			
SERINGFIELD	WO 03807-3943	Region 1	Facility Number	20288
GASCONADE MANOR NURSING H	OME			
	OME			
1910 NURSING HOME RD	OME	Telephone (573) 437-4101	Alzheimer's Unit	No
	MO 65066-2844	Telephone (573) 437-4101 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 79
1910 NURSING HOME RD OWENSVILLE		Level of Care: SNF		
1910 NURSING HOME RD		Level of Care: SNF	Bed Capacity	79
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520	MO 65066-2844	Level of Care: SNF County GASCONADE	Bed Capacity DMH Licensed	79 No
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520	MO 65066-2844 MO 65066-0520	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed	79 No
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE	MO 65066-2844 MO 65066-0520	Level of Care: SNF County GASCONADE	Bed Capacity DMH Licensed	79 No
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM	MO 65066-2844 MO 65066-0520	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	79 No 02804
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD	MO 65066-2844 MO 65066-0520 IENT CENTER	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	79 No 02804
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE	MO 65066-2844 MO 65066-0520 IENT CENTER	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	79 No 02804 No 19
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	79 No 02804 No 19 No
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO 17108 US HIGHWAY 62	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO 17108 US HIGHWAY 62 CAMPBELL	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	79 No 02804 No 19 No 14143
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO 17108 US HIGHWAY 62	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO 17108 US HIGHWAY 62 CAMPBELL	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	79 No 02804 No 19 No 14143
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HOME 17108 US HIGHWAY 62 CAMPBELL Mailing Address 17108 US HWY 62 CAMPBELL	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME MO 63933-6383 MO 63933-6383	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF County DUNKLIN	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	79 No 02804 No 19 No 14143 Yes 90 No
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HOME 17108 US HIGHWAY 62 CAMPBELL Mailing Address 17108 US HWY 62 CAMPBELL GEORGIA BROWN BLOSSER HOME	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME MO 63933-6383 MO 63933-6383	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143 Yes 90 No 02820
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO 17108 US HIGHWAY 62 CAMPBELL Mailing Address 17108 US HWY 62 CAMPBELL GEORGIA BROWN BLOSSER HOM 1210 EAST EASTWOOD ST	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME MO 63933-6383 MO 63933-6383 IE FOR THE AGED	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143 Yes 90 No 02820
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HOME 17108 US HIGHWAY 62 CAMPBELL Mailing Address 17108 US HWY 62 CAMPBELL GEORGIA BROWN BLOSSER HOME 1210 EAST EASTWOOD ST MARSHALL	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME MO 63933-6383 MO 63933-6383 IE FOR THE AGED MO 65340-1510	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid Telephone (660) 886-5022 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143 Yes 90 No 02820
1910 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GASCONADE TERRACE RETIREM 1930 NURSING HOME RD OWENSVILLE Mailing Address PO BOX 520 OWENSVILLE GENERAL BAPTIST NURSING HO 17108 US HIGHWAY 62 CAMPBELL Mailing Address 17108 US HWY 62 CAMPBELL GEORGIA BROWN BLOSSER HOM 1210 EAST EASTWOOD ST	MO 65066-2844 MO 65066-0520 IENT CENTER MO 65066-2844 MO 65066-0520 ME MO 63933-6383 MO 63933-6383 IE FOR THE AGED MO 65340-1510	Level of Care: SNF County GASCONADE Region 6 Medicare/Medicaid Telephone (573) 437-4833 Level of Care: ALF County GASCONADE Region 6 Telephone (573) 246-2155 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	79 No 02804 No 19 No 14143 Yes 90 No 02820

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GEORGIAN GARDENS CENTER FO	OR REHAB AND HEALTHCARE			
1 GEORGIAN GARDENS DR		Telephone (573) 438-6261		Yes
POTOSI	MO 63664-1436	Level of Care: SNF		120
Mailing Address 1 GEORGIAN GARD		County WASHINGTON		No
POTOSI	MO 63664-1436	Region 2 Medicare/Medicaid	Facility Number 028	830
GIDEON CARE CENTER				
300 LUNBECK		Telephone (573) 448-3505	Alzheimer's Unit Y	ES
GIDEON	MO 63848-9211	Level of Care: SNF	Bed Capacity	72
Mailing Address PO BOX 197	WO 03040-7211	County NEW MADRID		No
GIDEON	MO 63848-0197	Region 2 Medicare/Medicaid		538
GIDEOIV	1410 03040 0177	Region 2 Medical e/Medicald	racinty Number 13.	130
GLASGOW GARDENS				
100 AUDSLEY DR		Telephone (660) 338-2297	Alzheimer's Unit	No
GLASGOW	MO 65254-9537	Level of Care: SNF	Bed Capacity	59
Mailing Address 100 AUDSLEY DR		County HOWARD	DMH Licensed	No
GLASGOW	MO 65254-9537	Region 5 Medicare/Medicaid	Facility Number 016	559
OF ENDINE OF DEPARTMENT	O DEVIAD			
GLENDALE GARDENS NURSING &	& REHAB	(417) 000 0055		.,
3535 EAST CHEROKEE	MO (5000 2020	Telephone (417) 889-9955		No
SPRINGFIELD	MO 65809-2829	Level of Care: SNF		120 N
Mailing Address 3535 EAST CHEROK		County GREENE		No
SPRINGFIELD	MO 65809-2829	Region 1 Medicare/Medicaid	Facility Number 167	735
GLENFIELD MEMORY CARE				
118 OHMES ROAD		Telephone (636) 447-4440	Alzheimer's Unit	Yes
COTTLEVILLE	MO 63376-7649	Level of Care: ALF**	Bed Capacity	12
Mailing Address 118 OHMES RD		County SAINT CHARLES	DMH Licensed	No
COTTLEVILLE	MO 63376-7649	Region 5	Facility Number 303	372
GLENWOOD HEALTHCARE				
851 THOROUGHFARE		Telephone (417) 935-2992	Alzheimer's Unit	Yes
SEYMOUR	MO 65746-8767	Level of Care: SNF	Bed Capacity	60
Mailing Address 851 THOROUGHFAI		County WEBSTER		No
SEYMOUR	MO 65746-8767	Region 1 Medicare/Medicaid		944
bbinoen		Region 1 Medicare/Medicard	Tuestoy I (united 10)	
GOGGIN BOARDING HOME LLC				
620 COUNTY ROAD 40		Telephone (573) 697-5894	Alzheimer's Unit	No
CALEDONIA	MO 63631-9133	Level of Care: RCF	Bed Capacity	12
Mailing Address 620 COUNTY RD 40)	County IRON		Yes
CALEDONIA	MO 63631-9133	Region 2	Facility Number 029	937
GOLDEN AGE LIVING CENTER				
404 E THIRD ST		Telephone (573) 377-4521	Alzheimer's Unit	Yes
STOVER	MO 65078-0947	Level of Care: SNF	Bed Capacity	61
Mailing Address PO BOX 307		County MORGAN	- ·	No
STOVER	MO 65078-0307	Region 6 Medicare/Medicaid	Facility Number 029) 49

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GOLDEN AGE NURSING HOME			
12498 SE HWY 116	Telephone (660) 645-2243	Alzheimer's Unit	No
BRAYMER MO 64624-9107	Level of Care: SNF	Bed Capacity	83
Mailing Address 12498 SE HWY 116	County CALDWELL	DMH Licensed	No
BRAYMER MO 64624-9107	Region 4 Medicare/Medicaid	Facility Number	02957
GOLDEN ESTATE RESIDENTIAL CARE			
1134 WEST NORTON RD	Telephone (417) 833-4440	Alzheimer's Unit	No
SPRINGFIELD MO 65803-1070	Level of Care: RCF*	Bed Capacity	31
Mailing Address 1134 WEST NORTON RD	County GREENE	DMH Licensed	Yes
SPRINGFIELD MO 65803-1070	Region 1	Facility Number	02984
SI KINGI IELD MO 03003-1070	Region 1	Facility Number	02984
GOLDEN OAKS, LLC			
27882 HIGHWAY H	Telephone (660) 886-6172	Alzheimer's Unit	No
MARSHALL MO 65340-5303	Level of Care: ALF**	Bed Capacity	67
Mailing Address 27882 HIGHWAY H	County SALINE	DMH Licensed	No
MARSHALL MO 65340-5303	Region 5	Facility Number	15380
	S .	•	
GOLDEN YEARS CENTER FOR REHAB AND HEALTHCA	ARE		
2001 JEFFERSON PARKWAY	Telephone (816) 380-4731	Alzheimer's Unit	Yes
HARRISONVILLE MO 64701-3714	Level of Care: SNF	Bed Capacity	128
Mailing Address 2001 JEFFERSON PARKWAY	County CASS	DMH Licensed	No
HARRISONVILLE MO 64701-3714	Region 3 Medicare/Medicaid	Facility Number	12458
GOOD SAMARITAN CARE CENTER			
403 WEST MAIN ST	Telephone (660) 668-4515	Alzheimer's Unit	No
COLE CAMP MO 65325-1144	Level of Care: SNF	Bed Capacity	72
Mailing Address 403 WEST MAIN ST	County BENTON	DMH Licensed	No
COLE CAMP MO 65325-1144	Region 6 Medicare/Medicaid	Facility Number	03039
COLL CAVII NIO 0323-1144	Region 6 Medicare/Medicard	racinty Number	03039
GOOD SHEPHERD CARE CENTER			
1101 WEST CLAY RD	Telephone (573) 378-5411	Alzheimer's Unit	No
VERSAILLES MO 65084-1177	Level of Care: SNF	Bed Capacity	120
Mailing Address 1101 WEST CLAY RD	County MORGAN	DMH Licensed	No
VERSAILLES MO 65084-1177	Region 6 Medicare/Medicaid	Facility Number	21631
COOD SHEDHEDD COMMUNITY CADE AND DETTABLE	TATION		
GOOD SHEPHERD COMMUNITY CARE AND REHABILI' 200 WEST 12TH ST		Alahaima-t- IIi4	Vac
	Telephone (417) 232-4571	Alzheimer's Unit	Yes
LOCKWOOD MO 65682-8337	Level of Care: SNF	Bed Capacity	69 No
Mailing Address 200 WEST 12TH ST	County DADE	DMH Licensed	No
LOCKWOOD MO 65682-8337	Region 1 Medicare/Medicaid	Facility Number	03051
GOOD SHEPHERD RESIDENTIAL CARE FACILITY			
200 WEST 12TH	Telephone (417) 232-4571	Alzheimer's Unit	No
LOCKWOOD MO 65682-8337	Level of Care: RCF*	Bed Capacity	20
Mailing Address 200 WEST 12TH	County DADE	DMH Licensed	No
LOCKWOOD MO 65682-8337	Region 1	Facility Number	03051

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GOWER CONVALESCENT CENTE	R INC		
323 SOUTH HIGHWAY 169	K, IIVC	Telephone (816) 424-6483	Alzheimer's Unit No
GOWER	MO 64454-9116	Level of Care: SNF	Bed Capacity 82
Mailing Address PO BOX 170	110 04434 7110	County CLINTON	DMH Licensed No
GOWER	MO 64454-0170	Region 4 Medicare/Medicaid	Facility Number 03107
OOWER	1110 04454 0170	Region + Medical e/Medicalu	racinty runnoer 03107
GRAN VILLAS NEOSHO			
420 LYON DR		Telephone (417) 451-7071	Alzheimer's Unit No
NEOSHO	MO 64850-9194	Level of Care: RCF	Bed Capacity 30
Mailing Address 420 LYON DR		County NEWTON	DMH Licensed No
NEOSHO	MO 64850-9194	Region 1	Facility Number 20156
GRANBY HOUSE		T. I	
301 SOUTH MAIN	MO (4044 0226	Telephone (417) 472-6271	Alzheimer's Unit No
GRANBY	MO 64844-8336	Level of Care: SNF	Bed Capacity 60
Mailing Address 301 SOUTH MAIN	MO (4044 0226	County NEWTON	DMH Licensed No
GRANBY	MO 64844-8336	Region 1 Medicare/Medicaid	Facility Number 16481
GRAND MANOR NURSING & REH	ABILITATION CENTER		
3645 COOK AVE		Telephone (314) 531-2352	Alzheimer's Unit No
SAINT LOUIS	MO 63113-3801	Level of Care: SNF	Bed Capacity 120
Mailing Address 3645 COOK AVE		County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63113-3801	Region 7 Medicare/Medicaid	Facility Number 13324
GRAND RIVER HEALTH CARE		TELL (660) 646 0252	A11 *
118 TRENTON RD	MO (4(0) 4002	Telephone (660) 646-0353	Alzheimer's Unit No
CHILLICOTHE M. III. A D. LIO TRENTON DE	MO 64601-4002	Level of Care: SNF	Bed Capacity 60
Mailing Address 118 TRENTON RD	MO (4(01 4002	County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-4002	Region 4 Medicare/Medicaid	Facility Number 16939
GRAND ROYALE, THE			
2900 NE KENDALLWOOD PKWY		Telephone (816) 280-4280	Alzheimer's Unit NO
GLADSTONE	MO 64119-1831	Level of Care: ALF**	Bed Capacity 43
Mailing Address 2900 NE KENDALLV	WOOD PKWY	County CLAY	DMH Licensed No
GLADSTONE	MO 64119-1831	Region 4	Facility Number 03086
GRAND ROYALE, THE			
2900 NE KENDALLWOOD PKWY		Telephone (816) 280-4280	Alzheimer's Unit No
GLADSTONE	MO 64119-1831	Level of Care: SNF	Bed Capacity 28
Mailing Address 2900 NE KENDALLV		County CLAY	DMH Licensed No
GLADSTONE	MO 64119-1831	Region 4 Medicare	Facility Number 03086
GLADO TOTAL	07117 1031	Welon 4 Menicale	z acincy runnoci 03000
GRANDE AT CREVE COEUR THE			
450 NORTH LINDBERGH BLVD		Telephone (314) 628-0004	Alzheimer's Unit Yes
CREVE COEUR	MO 63141-7814	Level of Care: ALF**	Bed Capacity 58
Mailing Address 450 NORTH LINDBE		County SAINT LOUIS COUNTY	DMH Licensed No
CREVE COEUR	MO 63141-7814	Region 7	Facility Number 30479

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GRANDE AT LAUMEIER PARK TH	Œ		
12470 ROTT ROAD		Telephone (314) 462-0222	Alzheimer's Unit Yes
SUNSET HILLS	MO 63127-1247	Level of Care: ALF**	Bed Capacity 98
Mailing Address 12470 ROTT ROAD		County SAINT LOUIS COUNTY	DMH Licensed No
SUNSET HILLS	MO 63127-1247	Region 7	Facility Number 30466
GRANDVIEW HEALTHCARE CENT	TER		
201 GRAND AVE	1.0	Telephone (636) 239-9190	Alzheimer's Unit No
WASHINGTON	MO 63090-1209	Level of Care: SNF	Bed Capacity 102
Mailing Address 201 GRAND AVE	NO (2000 1200	County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-1209	Region 6 Medicare/Medicaid	Facility Number 15045
GRANITE HOUSE RCF LLC			
321 SOUTH MAIN ST		Telephone (573) 546-7283	Alzheimer's Unit No
IRONTON	MO 63650-1406	Level of Care: RCF	Bed Capacity 60
Mailing Address PO BOX 6	110 03030 1100	County IRON	DMH Licensed Yes
IRONTON	MO 63650-0066	Region 2	Facility Number 04628
RONTON	WO 03030 0000	Region 2	140110 1401001
GREEN ACRES RESIDENTIAL CAI	RE FACILITY, LLC		
3688 SAND CREEK ROAD		Telephone (573) 756-2917	Alzheimer's Unit No
FARMINGTON	MO 63640-7350	Level of Care: RCF	Bed Capacity 12
Mailing Address 3688 SAND CREEK	RD	County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-7350	Region 2	Facility Number 17289
GREEN PARK SENIOR LIVING CO	MMUNITY		
9350 GREEN PARK ROAD		Telephone (314) 845-0900	Alzheimer's Unit Yes
SAINT LOUIS	MO 63123-7211	Level of Care: SNF	Bed Capacity 188
Mailing Address 9350 GREEN PARK	RD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63123-7211	Region 7 Medicare/Medicaid	Facility Number 17565
CDEENAWAA E WEALENA CADE CON	NAME OF THE PARTY		
GREENVILLE HEALTH CARE CEN	NIER	T-11 (572) 224 2209	Al-haimanta Tirita Na
117 SYCAMORE ST GREENVILLE	MO (2044 0000	Telephone (573) 224-3298	Alzheimer's Unit No
	MO 63944-0000	Level of Care: SNF County WAYNE	Bed Capacity 60 DMH Licensed No
Mailing Address PO BOX 108 GREENVILLE	MO 63944-0108	•	
OREENVILLE	MO 03944-0108	Region 2 Medicare/Medicaid	Facility Number 15550
GREGORY RIDGE HEALTH CARE	CENTER		
7001 CLEVELAND AVE		Telephone (816) 333-0700	Alzheimer's Unit No
KANSAS CITY	MO 64132-1622	Level of Care: SNF	Bed Capacity 116
Mailing Address 7001 CLEVELAND A	AVE	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64132-1622	Region 3 Medicare/Medicaid	Facility Number 04109
HAMPTON HOUSE OF MALDEN, I	NC	T 1 1 (750) 057 (705)	All between the Tree Street
201 NORTH DECATUR	MO (29/2 2017	Telephone (573) 276-6054	Alzheimer's Unit No
MALDEN Mailing Address 201 N. DECATUR	MO 63863-2017	Level of Care: RCF*	Bed Capacity 22
Mailing Address 201 N DECATUR	MO (29/2 2017	County DUNKLIN	DMH Licensed Yes
MALDEN	MO 63863-2017	Region 2	Facility Number 03331

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HARAMBEE HOUSE, INC			
703 NORTH EIGHTH ST		Telephone (573) 443-6972	Alzheimer's Unit No
COLUMBIA	MO 65201-4516	Level of Care: RCF*	Bed Capacity 15
Mailing Address 703 NORTH EIGHTF		County BOONE	DMH Licensed Yes
COLUMBIA	MO 65201-4516	Region 6	Facility Number 17197
HARBOR PLACE - LINN			
24 TRENSHAW TRAIL		Telephone (573) 897-2100	Alzheimer's Unit NO
LINN	MO 65051-2874	Level of Care: RCF	Bed Capacity 24
Mailing Address 24 TRENSHAW TRA	AIL	County OSAGE	DMH Licensed No
LINN	MO 65051-2874	Region 6	Facility Number 31116
HADMONY CADDENC ACCICED	I IVING BY AMERICARE		
HARMONY GARDENS - ASSISTED 503 BURKARTH ROAD	LIVING BY AMERICARE	Telephone (660) 747-5411	Alzheimer's Unit No
WARRENSBURG	MO 64093-3145	Level of Care: ALF**	Bed Capacity 44
Mailing Address 503 BURKARTH RD		County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-3145	Region 3	Facility Number 18615
WARRENSBURG	1410 04093-3143	Region 3	Facility Number 18013
HAROLD AND LOUISE HEALTHC	ARE CENTER		
135 COMMUNICATION DR		Telephone (573) 221-1189	Alzheimer's Unit No
HANNIBAL	MO 63401-3670	Level of Care: RCF	Bed Capacity 98
Mailing Address 135 COMMUNICAT		County MARION	DMH Licensed Yes
HANNIBAL	MO 63401-3670	Region 5	Facility Number 29639
HARRIS HOUSE RESIDENTIAL CA	ARE FACILITY, THE		
3859 EAST 59TH TERRACE		Telephone (816) 599-5230	Alzheimer's Unit No
KANSAS CITY	MO 64130-4410	Level of Care: RCF	Bed Capacity 7
Mailing Address 3859 EAST 59TH TE	RRACE	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64130-4410	Region 3	Facility Number 16225
HARRIS RESIDENTIAL CARE CEN	TER LLC		
401 SOUTH HENRY		Telephone (573) 756-5376	Alzheimer's Unit No
FARMINGTON	MO 63640-1823	Level of Care: RCF*	Bed Capacity 37
Mailing Address PO BOX 675		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-0675	Region 2	Facility Number 02256
		1109.011	
	CYLYMYD.		
HARTLAND RESIDENTIAL CARE	CENTER	m 1 1 (650) 005 7005	
23435 LADDER DR	1.0	Telephone (660) 886-7093	Alzheimer's Unit No
MARSHALL	MO 65340-4662	Level of Care: RCF	Bed Capacity 12
Mailing Address 23435 LADDER DR		County SALINE	DMH Licensed No
MARSHALL	MO 65340-4662	Region 5	Facility Number 15163
HARTMANN VILLAGE - ASSISTEI	LIVING BY AMERICARE		
615 RANKIN MILL LN		Telephone (660) 882-9933	Alzheimer's Unit No
BOONVILLE	MO 65233-2873	Level of Care: ALF**	Bed Capacity 42
Mailing Address 615 RANKIN MILL I	3.7	C 4 COOPER	
BOONVILLE	MO 65233-2873	County COOPER Region 6	DMH Licensed No Facility Number 26026

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HARTON SENIOR LIVING				
1054 SOUTH HWY 47		Telephone (636) 377-4444	Alzheimer's Unit	No
WARRENTON	MO 63383-2625	Level of Care: RCF	Bed Capacity	36
Mailing Address 1054 SOUTH HWY		County WARREN	DMH Licensed	No
WARRENTON	MO 63383-2625	Region 6	Facility Number	30144
WARRENTON	WIO 03363-2023	Region 0	racinty Number	30144
HARTVILLE CARE CENTER				
649 WEST ROLLA ST		Telephone (417) 741-6192	Alzheimer's Unit	No
HARTVILLE	MO 65667-8221	Level of Care: SNF	Bed Capacity	60
Mailing Address 649 WEST ROLLA	ST	County WRIGHT	DMH Licensed	No
HARTVILLE	MO 65667-8221	Region 1 Medicare/Medicaid	Facility Number	17946
HARVESTER RESIDENTIAL CAR	r.			
35 LILLIAN DR	<u>L</u>	Telephone (636) 939-3833	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-7032	Level of Care: RCF*	Bed Capacity	38
Mailing Address 35 LILLIAN DR	MO 03304-7032	County SAINT CHARLES	DMH Licensed	Yes
SAINT CHARLES	MO 63304-7032	•		
SAINI CHARLES	MO 03304-7032	Region 5	Facility Number	03411
HAVEN, THE				
614 SOUTH BY-PASS		Telephone (573) 888-1201	Alzheimer's Unit	No
KENNETT	MO 63857-3240	Level of Care: RCF*	Bed Capacity	64
Mailing Address 612 SOUTH BY-PA	SS	County DUNKLIN	DMH Licensed	Yes
KENNETT	MO 63857-3240	Region 2	Facility Number	27620
			·	
HEALTHBRIDGE ST LOUIS				
1201 GARDEN PLAZA DR		Telephone (314) 831-3752	Alzheimer's Unit	No
FLORISSANT	MO 63033-2230	Level of Care: SNF	Bed Capacity	90
Mailing Address 1201 GARDEN PLA		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-2230	Region 7 Medicare/Medicaid	Facility Number	27146
HEART OF THE OZARKS HEALT	HCARE CENTER			
2004 CRESTVIEW ST		Telephone (417) 683-4129	Alzheimer's Unit	No
AVA				
	MO 65608-8903	Level of Care: SNF	Bed Capacity	120
	MO 65608-8903		Bed Capacity DMH Licensed	120 No
Mailing Address PO BOX 727 AVA	MO 65608-8903 MO 65608-0727	Level of Care: SNF County DOUGLAS Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No 01290
Mailing Address PO BOX 727		County DOUGLAS	DMH Licensed	No
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI	MO 65608-0727	County DOUGLAS Region 1 Medicare/Medicaid	DMH Licensed Facility Number	No 01290
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR	MO 65608-0727 LITATION CENTER	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225	DMH Licensed Facility Number Alzheimer's Unit	No 01290 Yes
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU	MO 65608-0727	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 01290 Yes 102
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU Mailing Address 2525 BOUTIN DR	MO 65608-0727 LITATION CENTER MO 63701-8551	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF County CAPE GIRARDEAU	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 01290 Yes 102 No
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU	MO 65608-0727 LITATION CENTER	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 01290 Yes 102
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU Mailing Address 2525 BOUTIN DR CAPE GIRARDEAU	MO 65608-0727 LITATION CENTER MO 63701-8551 MO 63701-8551	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF County CAPE GIRARDEAU	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 01290 Yes 102 No
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU Mailing Address 2525 BOUTIN DR	MO 65608-0727 LITATION CENTER MO 63701-8551 MO 63701-8551	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF County CAPE GIRARDEAU	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 01290 Yes 102 No
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU Mailing Address 2525 BOUTIN DR CAPE GIRARDEAU HEARTLAND II RESIDENTIAL CA	MO 65608-0727 LITATION CENTER MO 63701-8551 MO 63701-8551	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01290 Yes 102 No 01023
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU Mailing Address 2525 BOUTIN DR CAPE GIRARDEAU HEARTLAND II RESIDENTIAL CA 117 SOUTH 15TH ST	MO 65608-0727 LITATION CENTER MO 63701-8551 MO 63701-8551 ARE FACILITY, INC MO 64501-2904	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid Telephone (816) 676-1506	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01290 Yes 102 No 01023
Mailing Address PO BOX 727 AVA HEARTLAND CARE AND REHABI 2525 BOUTIN DR CAPE GIRARDEAU Mailing Address 2525 BOUTIN DR CAPE GIRARDEAU HEARTLAND II RESIDENTIAL CA 117 SOUTH 15TH ST SAINT JOSEPH	MO 65608-0727 LITATION CENTER MO 63701-8551 MO 63701-8551 ARE FACILITY, INC MO 64501-2904	County DOUGLAS Region 1 Medicare/Medicaid Telephone (573) 334-5225 Level of Care: SNF County CAPE GIRARDEAU Region 2 Medicare/Medicaid Telephone (816) 676-1506 Level of Care: RCF*	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 01290 Yes 102 No 01023

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HEARTLAND III RCF				
1606 SOUTH 38TH ST		Telephone (816) 390-8941	Alzheimer's Unit	No
SAINT JOSEPH	MO 64507-2216	Level of Care: RCF	Bed Capacity	18
Mailing Address PO BOX 8923		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64508-8923	Region 4	Facility Number	00920
HEARTLAND RESIDENTIAL CARE	FACILITY, INC			
1311 FRANCIS ST		Telephone (816) 233-5779	Alzheimer's Unit	No
SAINT JOSEPH	MO 64501-2318	Level of Care: RCF	Bed Capacity	20
Mailing Address 1311 FRANCIS ST		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64501-2318	Region 4	Facility Number	02491
HEISINGER BLUFFS HEALTHCAR	F WESTERN CAMPUS			
1306 WEST MAIN ST	L WESTERN CAMI US	Telephone (573) 635-0166	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-1356	Level of Care: SNF	Bed Capacity	69
Mailing Address 1306 WEST MAIN ST		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-1356	Region 6 Medicare/Medicaid	Facility Number	07572
JEH ERBON CH I	MO 03107 1330	Region 6 Medicare/Medicard	racincy (value)	07372
HEISINGER BLUFFS REHAB AND I	HEALTHCARE CENTER			
1002 WEST MAIN ST		Telephone (573) 636-6288	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-6901	Level of Care: SNF	Bed Capacity	60
Mailing Address 1002 WEST MAIN ST		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-6901	Region 6 Medicare/Medicaid	Facility Number	03479
HEISINGER BLUFFS SENIOR LIVI	NG			
HEISINGER BLUFFS SENIOR LIVI 1002 WEST MAIN ST	NG	Telephone (573) 636-6288	Alzheimer's Unit	Yes
	NG MO 65109-6901	Telephone (573) 636-6288 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 111
1002 WEST MAIN ST	MO 65109-6901	• '		
1002 WEST MAIN ST JEFFERSON CITY	MO 65109-6901	Level of Care: ALF**	Bed Capacity	111
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST	MO 65109-6901	Level of Care: ALF** County COLE	Bed Capacity DMH Licensed	111 No
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY	MO 65109-6901 MO 65109-6901	Level of Care: ALF** County COLE Region 6	Bed Capacity DMH Licensed	111 No
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY	MO 65109-6901	Level of Care: ALF** County COLE Region 6	Bed Capacity DMH Licensed	111 No
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE	MO 65109-6901 MO 65109-6901	Level of Care: ALF** County COLE Region 6	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	111 No 03479
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	111 No 03479 No 50
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	111 No 03479 No
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	111 No 03479 No 50
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	111 No 03479 No 50
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	111 No 03479 No 50 No 20193
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	111 No 03479 No 50 No 20193
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	111 No 03479 No 50 No 20193
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS Mailing Address 4401 NORTH HANLE	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710 EY RD	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 03479 No 50 No 20193 No 120 No
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	111 No 03479 No 50 No 20193
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS Mailing Address 4401 NORTH HANLES SAINT LOUIS	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710 EY RD MO 63134-2710	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 03479 No 50 No 20193 No 120 No
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS Mailing Address 4401 NORTH HANLE SAINT LOUIS HERITAGE HALL NURSING CENT	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710 EY RD MO 63134-2710	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 03479 No 50 No 20193 No 120 No 00411
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS Mailing Address 4401 NORTH HANLE SAINT LOUIS HERITAGE HALL NURSING CENT 750 EAST HIGHWAY 22	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710 EY RD MO 63134-2710 EER	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	111 No 03479 No 50 No 20193 No 120 No 00411
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS Mailing Address 4401 NORTH HANLES SAINT LOUIS HERITAGE HALL NURSING CENT 750 EAST HIGHWAY 22 CENTRALIA	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710 EY RD MO 63134-2710 ER MO 65240-1146	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 682-5551 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 03479 No 50 No 20193 No 120 No 00411
1002 WEST MAIN ST JEFFERSON CITY Mailing Address 1002 WEST MAIN ST JEFFERSON CITY HENLEY PLACE OF NEOSHO, A SE 1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS Mailing Address 4401 NORTH HANLE SAINT LOUIS HERITAGE HALL NURSING CENT 750 EAST HIGHWAY 22	MO 65109-6901 MO 65109-6901 ENIOR RESIDENCE BY AMERICARE MO 64850-9076 MO 64850-9076 MO 63134-2710 EY RD MO 63134-2710 ER MO 65240-1146	Level of Care: ALF** County COLE Region 6 Telephone (417) 451-1000 Level of Care: RCF County NEWTON Region 1 Telephone (314) 521-7471 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	111 No 03479 No 50 No 20193 No 120 No 00411

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HERITAGE HILLS ASSISTED LIVING FACILI	TY			
ROUTE 5, BOX 68	Telephone	(573) 866-2003	Alzheimer's Unit	No
PATTON MO 6366	2-9760 Level of Care:	ALF	Bed Capacity	24
Mailing Address PO BOX B	County BO	OLLINGER	DMH Licensed	Yes
PATTON MO 6366	2-0010 Region 2		Facility Number	18783
HEDITACE MIDSING CENTED SVILLED M	IDSING DV AMEDICADE			
HERITAGE NURSING CENTER - SKILLED NU 1802 SAINT FRANCIS ST		(573) 888-1044	Alzheimer's Unit	No
KENNETT MO 6385	Telephone 7-1568 Level of Care:	` '		72
Mailing Address PO BOX 827		UNKLIN	Bed Capacity DMH Licensed	No
KENNETT MO 6385				
KENNETT MO 0383	7-0827 Region 2	Medicare/Medicaid	Facility Number	17533
HERITAGE VILLAGE OF GLADSTONE	m	(04.5) 454 5400		
3000 NORTH EAST 64TH ST	Telephone	(816) 454-5130	Alzheimer's Unit	No
GLADSTONE MO 6411			Bed Capacity	60
Mailing Address 3000 NE 64TH ST	•	LAY	DMH Licensed	No
GLADSTONE MO 6411	9-1569 Region 4		Facility Number	12510
HERITAGE VILLAGE OF PLATTE CITY				
15 WALLINGFORD DR	Telephone	(816) 858-2182	Alzheimer's Unit	No
PLATTE CITY MO 6407			Bed Capacity	30
Mailing Address 15 WALLINGFORD DR		ATTE	DMH Licensed	No
PLATTE CITY MO 6407	9-9604 Region 4		Facility Number	13182
HERMITAGE NURSING & REHAB				
18599 FIRST STREET	Telephone	(417) 745-2111	Alzheimer's Unit	Yes
HERMITAGE MO 6566			Bed Capacity	120
Mailing Address PO BOX 325	•	CKORY	DMH Licensed	No
HERMITAGE MO 6566	8-0325 Region 1	Medicare/Medicaid	Facility Number	10240
HICKORY MANOR	Talankana	(572) (74 2111	Alebeier este Tiet	NI-
209 HICKORY ST	Telephone	(573) 674-2111	Alzheimer's Unit	No
LICKING MO 6554			Bed Capacity	60
Mailing Address 209 HICKORY ST	·	EXAS	DMH Licensed	No
LICKING MO 6554	2-9847 Region 1	Medicare/Medicaid	Facility Number	07929
HIDDEN ACDES ASSISTED A WING				
HIDDEN ACRES ASSISTED LIVING	77.1.1	(572) 756 0141	Alabata anto Trota	NT_
19235 STATE ROUTE EE	Telephone	(573) 756-8141	Alzheimer's Unit	No
SAINTE GENEVIEVE MO 6367			Bed Capacity	18
Mailing Address 19235 STATE ROUTE EE		AINTE GENEVIEVE	DMH Licensed	Yes
SAINTE GENEVIEVE MO 6367	0-8213 Region 2		Facility Number	19721
HIDDEN ACRES ASSISTED A WING WAY S				
HIDDEN ACRES ASSISTED LIVING II LLC	Tolomb	(572) 756 0141	Alzhaiman'a Unit	Ma
19235 STATE ROUTE EE	Telephone	(573) 756-8141	Alzheimer's Unit	No
SAINTE GENEVIEVE MO 6367			Bed Capacity	18 Voc
Mailing Address 19235 STATE ROUTE EE		AINTE GENEVIEVE	DMH Licensed	Yes
SAINTE GENEVIEVE MO 6367	0-8213 Region 2		Facility Number	11134

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HIDDEN LAKE CARE CENTER			
11400 HIDDEN LAKE DR	Telephone (816) 737-1010	Alzheimer's Unit	No
RAYTOWN MO 64133-7409	Level of Care: SNF	Bed Capacity	112
Mailing Address 11400 HIDDEN LAKE DR	County JACKSON	DMH Licensed	No
RAYTOWN MO 64133-7409	Region 3 Medicare/Medicaid	Facility Number	17146
HIDDEN LAKE CARE CENTER			
11400 HIDDEN LAKE DR	Telephone (816) 737-1010	Alzheimer's Unit	No
RAYTOWN MO 64133-7409	Level of Care: RCF*	Bed Capacity	48
Mailing Address 11400 HIDDEN LAKE DR	County JACKSON	DMH Licensed	No
RAYTOWN MO 64133-7409	Region 3	Facility Number	17146
HIGHLAND CREST - ASSISTED LIVING BY AMERICARE			
2204 S HALLIBURTON ST	Telephone (660) 627-8004	Alzheimer's Unit	No
KIRKSVILLE MO 63501-4651	Level of Care: ALF**	Bed Capacity	42
Mailing Address 2204 S HALLIBURTON ST	County ADAIR	DMH Licensed	No
KIRKSVILLE MO 63501-4651	Region 5	Facility Number	16785
HIGHLAND REHABILITATION & HEALTH CARE CENTER			
904 EAST 68TH ST	Telephone (816) 333-5485	Alzheimer's Unit	NO
KANSAS CITY MO 64131-1305	Level of Care: SNF	Bed Capacity	162
Mailing Address 904 EAST 68TH ST	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64131-1305	Region 3 Medicare/Medicaid	Facility Number	06782
WAY CONCENTATION			
HILL CREST MANOR	T-1k (916) 592 2110	41-1	NI-
801 SOUTH COLBY	Telephone (816) 583-2119	Alzheimer's Unit	No
HAMILTON MO 64644-8287	Level of Care: SNF	Bed Capacity	90
Mailing Address 801 SOUTH COLBY	County CALDWELL	DMH Licensed	No
HAMILTON MO 64644-8287	Region 4 Medicare/Medicaid	Facility Number	03315
HILL CREST MANOR			
801 SOUTH COLBY	Telephone (816) 583-2119	Alzheimer's Unit	No
HAMILTON MO 64644-8287	Level of Care: RCF	Bed Capacity	24
Mailing Address 801 SOUTH COLBY	County CALDWELL	DMH Licensed	No
HAMILTON MO 64644-8287	Region 4	Facility Number	03315
HAVILLION MO 04044-0207	Region 7	racinty Number	03313
HILLCREST CARE CENTER, INC			
1108 CLARKE ST	Telephone (636) 586-3022	Alzheimer's Unit	No
DE SOTO MO 63020-2706	Level of Care: SNF	Bed Capacity	120
Mailing Address 1108 CLARKE ST	County JEFFERSON	DMH Licensed	No
DE SOTO MO 63020-2706	Region 2 Medicare/Medicaid	Facility Number	20084
	- medicar / medicar		23007
HILLCREST RESIDENTIAL CARE, INC			
9415 NORTH BROWN STATION RD	Telephone (573) 696-3201	Alzheimer's Unit	No
COLUMBIA MO 65202-8671	Level of Care: ALF	Bed Capacity	33
Mailing Address 9415 NORTH BROWN STATION RD	County BOONE	DMH Licensed	Yes
COLUMBIA MO 65202-8671	Region 6	Facility Number	03572

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HILLSIDE LIVING CENTER				
10160 RESTORATION CIRCLE ROAL)	Telephone (573) 562-0303	Alzheimer's Unit	No
MINERAL POINT	MO 63660-8538	Level of Care: ALF**	Bed Capacity	60
Mailing Address PO BOX 534		County WASHINGTON	DMH Licensed	Yes
PARK HILLS	MO 63601-0534	Region 2	Facility Number	09270
HILL CIDE DEHAD AND HEAT WHO	A DE CENTRED			
HILLSIDE REHAB AND HEALTHO	CARE CENTER	T-1 (214) 299 4121	A 1-1	Yes
SAINT LOUIS	MO 63147-1606	Telephone (314) 388-4121 Level of Care: SNF	Alzheimer's Unit	208
			Bed Capacity DMH Licensed	208 No
Mailing Address 1265 MCLARAN AV SAINT LOUIS	MO 63147-1606			
SAINT LOUIS	MO 03147-1000	Region 7 Medicare/Medicaid	Facility Number	04687
HILLTOP HAVEN RESIDENTIAL (CARE FACILITY			
18941 CR 305A		Telephone (573) 226-5426	Alzheimer's Unit	No
EMINENCE	MO 65466-9702	Level of Care: RCF	Bed Capacity	20
Mailing Address 18941 CR 305A		County SHANNON	DMH Licensed	Yes
EMINENCE	MO 65466-9702	Region 2	Facility Number	03615
		8	·	******
HOLDEN MANOR CARE CENTER				
2005 SOUTH LEXINGTON		Telephone (816) 732-4138	Alzheimer's Unit	No
HOLDEN	MO 64040-1610	Level of Care: SNF	Bed Capacity	52
Mailing Address 2005 SOUTH LEXIN	GTON	County JOHNSON	DMH Licensed	No
HOLDEN	MO 64040-1610	Region 3 Medicare/Medicaid	Facility Number	08334
HOLIDAY RESIDENTIAL CARE				
1019 OLD ST MARY'S RD		Telephone (573) 547-7398	Alzheimer's Unit	No
PERRYVILLE	MO 63775-1298	Level of Care: RCF*	Bed Capacity	20
Mailing Address 1019 OLD ST MARY		County PERRY	DMH Licensed	No
PERRYVILLE	MO 63775-1298	Region 2	Facility Number	19872
TERRIVILLE	WIO 03773-1276	Region 2	Facinty Number	19872
HOLLY HILLS RETIREMENT HON	ME			
6421 MINNESOTA		Telephone (314) 351-0767	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2808	Level of Care: RCF*	Bed Capacity	15
Mailing Address 6421 MINNESOTA		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63111-2808	Region 7	Facility Number	03678
HOMESTEAD AT HICKORY WEW	DETERMENT COMMINER THE			
1481 MARBACH DRIVE	RETIREMENT COMMUNITY, THE	Telephone (636) 239-1941	Alghoimenta II	No
	MO (2000 4626	• '	Alzheimer's Unit	
WASHINGTON Mailing Address 1491 MARRACH DE	MO 63090-4636	Level of Care: ALF	Bed Capacity	36
Mailing Address 1481 MARBACH DE		County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-4636	Region 6	Facility Number	32345
HOPE CARE CENTER				
115 EAST 83RD ST		Telephone (816) 523-3988	Alzheimer's Unit	No
KANSAS CITY	MO 64114-2537	Level of Care: SNF	Bed Capacity	16
Mailing Address 115 EAST 83RD ST		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-2537	Region 3 Medicaid	Facility Number	21370

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HOPEDALE COTTAGE ASSISTED I	LIVING THE		
1314 W SCHOOL STREET		Telephone (417) 581-1308	Alzheimer's Unit Yes
OZARK	MO 65721-6618	Level of Care: ALF**	Bed Capacity 14
Mailing Address 1314 W SCHOOL STE	REET	County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-6618	Region 1	Facility Number 30302
HOUSE OF CARE CENTER			
3744 BENTON BLVD		Telephone (816) 921-6852	Alzheimer's Unit No
KANSAS CITY	MO 64128-2515	Level of Care: RCF	Bed Capacity 8
Mailing Address 3744 BENTON BLVD		County JACKSON	DMH Licensed Yes
KANSAS CITY	MO 64128-7912	Region 3	Facility Number 17001
Mil (of to Cit i	110 01120 7712	Region 5	Tacinty Number 17001
HOUSTON HOUSE			
1000 NORTH INDUSTRIAL DR		Telephone (417) 967-2527	Alzheimer's Unit No
HOUSTON	MO 65483-9400	Level of Care: SNF	Bed Capacity 96
	MO 63483-9400		
Mailing Address PO BOX 199	110 (5102.0100		
HOUSTON	MO 65483-0199	Region 1 Medicare/Medicaid	Facility Number 10626
HUDSON HOUSE			
		T. I. I. (417) 679 2160	All to the N-
1700-B SOUTH HUDSON AVE	140 (5(05 0515	Telephone (417) 678-2169	Alzheimer's Unit No
AURORA	MO 65605-2717	Level of Care: RCF*	Bed Capacity 41
Mailing Address 1700-B S HUDSON A		County LAWRENCE	DMH Licensed No
AURORA	MO 65605-2717	Region 1	Facility Number 10444
HUNTER ACRES CARING CENTER			
628 NORTH WEST ST		Telephone (573) 471-7130	Alzheimer's Unit Yes
SIKESTON	MO 63801-4738	Level of Care: SNF	Bed Capacity 120
			DMH Licensed No
Mailing Address 628 NORTH WEST ST		·	
SIKESTON	MO 63801-4738	Region 2 Medicare/Medicaid	Facility Number 07345
IGNITE MEDICAL RESORT BLUE S	SPRINGS		
20511 E TRINITY PLACE		Telephone (816) 622-2900	Alzheimer's Unit NO
BLUE SPRINGS	MO 64015-9501	Level of Care: SNF	Bed Capacity 90
Mailing Address 20511 E TRINITY PLA		County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64015-9501		
DLUE SPRINGS	MO 04013-9301	Region 3 Medicare/Medicaid	Facility Number 32246
IGNITE MEDICAL RESORT CARON	NDELET LLC		
621 CARONDELET DR	-	Telephone (816) 941-1300	Alzheimer's Unit No
KANSAS CITY	MO 64114-4670	Level of Care: SNF	Bed Capacity 162
Mailing Address 621 CARONDELET D		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64114-4670		Facility Number 12185
KANSAS CII I	1VIO 04114-40/0	Region 3 Medicare/Medicaid	Facility Number 12185
IGNITE MEDICAL RESORT KANSA	S CITY LLC		
2100 NW BARRY ROAD		Telephone (816) 521-6610	Alzheimer's Unit No
KANSAS CITY	MO 64154-1000	Level of Care: SNF	Bed Capacity 90
Mailing Address 2100 NW BARRY RO		County PLATTE	DMH Licensed No
KANSAS CITY	MO 64154-1000	Region 4 Medicare/Medicaid	Facility Number 31464
	1.10 01131 1000	region i vicultal e/ivieultalu	2 40110, 1,4111001 31404

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IGNITE MEDICAL RESORT ST MA	ARYS LLC		
111 MOCK AVE		Telephone (816) 228-5655	Alzheimer's Unit Yes
BLUE SPRINGS	MO 64014-2504	Level of Care: SNF	Bed Capacity 130
Mailing Address 111 MOCK AVE		County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64014-2504	Region 3 Medicare/Medicaid	Facility Number 13219
IGNITE MEDICAL RESORT ST MA	DVCIIC		
111 MOCK AVE	KISLLC	Telephone (816) 228-5655	Alzheimer's Unit No
BLUE SPRINGS	MO 64014-2504	Level of Care: ALF**	Bed Capacity 57
Mailing Address 111 MOCK AVE	WIO 04014-2304	County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64014-2504	Region 3	Facility Number 13219
BLUE SI KINGS	WO 04014-2304	Region 3	racinty Number 13219
INDEPENDENCE CARE CENTER (OF PERRY COUNTY		
800 SOUTH KINGSHIGHWAY		Telephone (573) 547-6546	Alzheimer's Unit Yes
PERRYVILLE	MO 63775-2106	Level of Care: SNF	Bed Capacity 133
Mailing Address 800 SOUTH KINGSI	HWY	County PERRY	DMH Licensed No
PERRYVILLE	MO 63775-2106	Region 2 Medicare/Medicaid	Facility Number 06393
INDEPENDENCE COURT			
121 INDEPENDENCE DR		Telephone (573) 547-1499	Alzheimer's Unit No
PERRYVILLE	MO 63775-1496	Level of Care: RCF*	Bed Capacity 75
Mailing Address 121 INDEPENDENCE		County PERRY	DMH Licensed No
PERRYVILLE	MO 63775-1496	Region 2	Facility Number 06393
TERRY VILLE	110 03773 1170	Region 2	raciney (tamber 003)3
INDEPENDENCE MANOR CARE C	ENTER		
1600 SOUTH KINGS HIGHWAY		Telephone (816) 833-4777	Alzheimer's Unit Yes
INDEPENDENCE	MO 64055-1853	Level of Care: SNF	Bed Capacity 99
Mailing Address 1600 SOUTH KINGS	HIGHWAY	County JACKSON	DMH Licensed No
INDEPENDENCE	MO 64055-1853	Region 3 Medicare/Medicaid	Facility Number 03807
INDEPENDENCE SQUARE RESIDE	ENTIAL CARE CENTER		
1136 SOUTH MAIN ST		Telephone (573) 547-8600	Alzheimer's Unit No
PERRYVILLE	MO 63775-8802	Level of Care: RCF*	Bed Capacity 20
Mailing Address 1136 S MAIN ST		County PERRY	DMH Licensed No
PERRYVILLE	MO 63775-8802	Region 2	Facility Number 14309
		-	
J & J RESIDENTIAL CARE FACIL	тту п		
104 WESBECHER	NO 50551 0050	Telephone (573) 238-1008	Alzheimer's Unit No
MARBLE HILL	MO 63764-0378	Level of Care: RCF*	Bed Capacity 12
Mailing Address PO BOX 378		County BOLLINGER	DMH Licensed Yes
MARBLE HILL	MO 63764-0378	Region 2	Facility Number 07171
JACKSON MANOR NURSING HOM	TE .		
710 BROADRIDGE DR		Telephone (573) 243-3101	Alzheimer's Unit Yes
JACKSON	MO 63755-3042	Level of Care: SNF	Bed Capacity 90
Mailing Address 710 BROADRIDGE	DR	County CAPE GIRARDEAU	DMH Licensed No
JACKSON	MO 63755-3042	Region 2 Medicare/Medicaid	Facility Number 03438
0110125011			

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JACOBS CARE CENTER, LLC		T. 1		
932 WEST STATE	10	Telephone (417) 865-6140	Alzheimer's Unit No	
	MO 65806-2846	Level of Care: RCF	Bed Capacity 12	
Mailing Address 932 WEST STATE	110 65006 2016	County GREENE	DMH Licensed Yes	
SPRINGFIELD N	MO 65806-2846	Region 1	Facility Number 06229	9
AAMEG DWED NUDGING AND DEWAA	DAY ALL A MIXON			
JAMES RIVER NURSING AND REHAI	BILITATION	T. 1 (417) 990 9500	A	
3550 EAST BATTLEFIELD	440 65000 2400	Telephone (417) 889-9500	Alzheimer's Unit No	
	MO 65809-3400	Level of Care: SNF	Bed Capacity 120	
Mailing Address 3550 EAST BATTLEFIE		County GREENE	DMH Licensed No	
SPRINGFIELD N	MO 65809-3400	Region 1 Medicare/Medicaid	Facility Number 17645	5
JANE HOWELL STUPP APARTMENT	ng.			
2443 PROUHET AVE	5	Telephone (314) 890-7100	Alzheimer's Unit No	0
	MO 63114-1946	Level of Care: RCF*	Bed Capacity 30	
Mailing Address 2443 PROUHET AVE		County SAINT LOUIS COUNTY	DMH Licensed Yes	
0	MO 63114-1946	Region 7	Facility Number 18369	
OVERLAND	VIO 03114-1740	Region /	racinty runnoci 1830s	7
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		Telephone (816) 761-4744	Alzheimer's Unit No	О
KANSAS CITY N	MO 64138-4414	Level of Care: SNF	Bed Capacity 26	6
Mailing Address 8745 JAMES A REED R	RD	County JACKSON	DMH Licensed No	o
KANSAS CITY N	MO 64138-4414	Region 3 Medicaid	Facility Number 12724	4
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		Telephone (816) 761-4744	Alzheimer's Unit No	Э
KANSAS CITY	MO 64138-4414	Level of Care: RCF*	Bed Capacity	6
Mailing Address 8745 JAMES A REED R	RD	County JACKSON	DMH Licensed No	O
KANSAS CITY N	MO 64138-4414	Region 3	Facility Number 12724	4
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		Telephone (816) 761-4744	Alzheimer's Unit No	0
	MO 64138-4414	Level of Care: ICF	Bed Capacity 26	
Mailing Address 8745 JAMES A REED R		County JACKSON	DMH Licensed No	
	MO 64138-4414	Region 3 Medicaid	Facility Number 12724	
Millions CITT	10 04130 4414	Region 5 Wedicaid	Tacinty Number 12/2-	т
JEFFERSON CITY MANOR CARE CE	NTER			
1720 VIETH DR		Telephone (573) 635-6193	Alzheimer's Unit No	О
JEFFERSON CITY N	MO 65109-2522	Level of Care: SNF	Bed Capacity 102	2
Mailing Address 1720 VIETH DR		County COLE	DMH Licensed No	О
JEFFERSON CITY N	MO 65109-2522	Region 6 Medicare/Medicaid	Facility Number 03870	0
TEEEEDSON CITY MIDSING AND DE	HARH ITATION CENTED 11 C			
JEFFERSON CITY NURSING AND RE 1221 SOUTHGATE LN	MADILITATION CENTER, LLC	Telephone (573) 635-3131	Alzheimer's Unit Yes	c
	MO 65109-2465	Level of Care: SNF	Bed Capacity 120	
Mailing Address PO BOX 104118	.10 03107-2403	County COLE	DMH Licensed No	
	MO 65110-4118	•	Facility Number 01865	
JETT LINDON CITT	*10 UJ11U- T 110	Region 6 Medicare/Medicaid	racinty number 01803	י

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JEFFERSON GARDENS - ASSISTI	ED LIVING BY AMERICARE			
509 WEST ROGERS ST		Telephone (660) 885-9770	Alzheimer's Unit	No
CLINTON	MO 64735-2548	Level of Care: ALF**	Bed Capacity	42
Mailing Address 509 WEST ROGER	S ST	County HENRY	DMH Licensed	No
CLINTON	MO 64735-2548	Region 1	Facility Number	20603
JEFFERSON HEALTH CARE				
615 SW OLDHAM PARKWAY		Telephone (816) 524-3328	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64081-2602	Level of Care: SNF	Bed Capacity	120
Mailing Address 615 SW OLDHAM	PKWY	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-2602	Region 3 Medicare/Medicaid	Facility Number	04415
70F 67 DV DEGYDDYNY				
JOE CLARK RESIDENTIAL CARI 1495 EAST ASHLAND ST	Е НОМЕ	Telephone (417) 667-5000	Alzheimer's Unit	No
	MO 64772 4016		Bed Capacity	34
NEVADA	MO 64772-4016			
Mailing Address PO BOX 246	MO (4772 0246	County VERNON	DMH Licensed	No
NEVADA	MO 64772-0246	Region 1	Facility Number	23419
JOHN KNOX VILLAGE CARE CE	NTER			
600 NW PRYOR ROAD		Telephone (816) 347-2400	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64081-1104	Level of Care: SNF	Bed Capacity	430
Mailing Address 600 NW PRYOR R		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-1104	Region 3 Medicare/Medicaid	Facility Number	14529
		region - Medicare/Medicard	Tuesday 1 (damage)	11329
JOHNSON COUNTY CARE CENT	ER			
122 EAST MARKET ST		Telephone (660) 747-8101	Alzheimer's Unit	No
WARRENSBURG	MO 64093-1818	Level of Care: ICF	Bed Capacity	87
Mailing Address 122 EAST MARKE	T ST	County JOHNSON	DMH Licensed	No
WARRENSBURG	MO 64093-1818	Region 3 Medicaid	Facility Number	05309
JOLET HOME		 (0.1.6) 		
3920 FOREST	MO (4110 1000	Telephone (816) 531-5308	Alzheimer's Unit	No
KANSAS CITY	MO 64110-1220	Level of Care: RCF	Bed Capacity	17
Mailing Address 3920 FOREST	NO 64110 1000	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64110-1220	Region 3	Facility Number	03982
JONES' WILDWOOD CARE CENT	ΓER			
12806 HWY 151		Telephone (660) 291-8636	Alzheimer's Unit	No
MADISON	MO 65263-3114	Level of Care: RCF	Bed Capacity	32
Mailing Address PO BOX 69		County MONROE	DMH Licensed	Yes
MADISON	MO 65263-0069	Region 5	Facility Number	08573
	2 30230 3337	Lugion 5	- Homey Mannet	00010
JOPLIN GARDENS				
2810 SOUTH JACKSON AVE		Telephone (417) 572-0041	Alzheimer's Unit	No
JOPLIN	MO 64804-2524	Level of Care: SNF	Bed Capacity	92
Mailing Address 2810 SOUTH JACK	SSON AVE	County JASPER	DMH Licensed	No
JOPLIN	MO 64804-2524	Region 1 Medicare/Medicaid	Facility Number	01373

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JOPLIN HEALTH AND REHABILIT	CATION CENTED		
2218 WEST 32ND ST	TATION CENTER	Telephone (417) 623-5264	Alzheimer's Unit Yes
JOPLIN	MO 64804-3514	Level of Care: SNF	
			Bed Capacity 120
Mailing Address 2218 WEST 32ND ST		County NEWTON	DMH Licensed No
JOPLIN	MO 64804-3514	Region 1 Medicare/Medicaid	Facility Number 12583
JORDAN CREEK NURSING & REH	AR	TEMPORARY CLO	SURE - STAFFING
910 SOUTH WEST AVE	. 11	Telephone (417) 865-8741	Alzheimer's Unit Yes
SPRINGFIELD	MO 65802-4950	Level of Care: SNF	Bed Capacity 120
Mailing Address 910 SOUTH WEST A		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-4950	Region 1 Medicare/Medicaid	Facility Number 03245
SI KIIVOI ILLD	WO 03002-4730	Region 1 Medicare/Medicaid	racinty Number 03243
JOY ADULT CARE CENTER			
614 SOUTH MAIN		Telephone (660) 885-8328	Alzheimer's Unit No
CLINTON	MO 64735-2620	Level of Care: RCF*	Bed Capacity 42
Mailing Address PO BOX 8		County HENRY	DMH Licensed Yes
CLINTON	MO 64735-0008	Region 1	Facility Number 07268
			•
JOY ASSISTED LIVING FOR SENIO	ORS		
2030 W MOUNT VERNON ST		Telephone (417) 864-8805	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4846	Level of Care: ALF	Bed Capacity 74
Mailing Address PO BOX 9655		County GREENE	DMH Licensed Yes
SPRINGFIELD	MO 65801-9655	Region 1	Facility Number 19668
EADIH MUDGING HOMES INC			
KABUL NURSING HOMES, INC		T-l-nh (417) 0/2 2712	Al-L-i
1000 MAIN ST	MO (5(00 0125	Telephone (417) 962-3713	Alzheimer's Unit No
CABOOL 1000 MARI ST	MO 65689-9125	Level of Care: SNF	Bed Capacity 99
Mailing Address 1000 MAIN ST	MO (5(00 0125	County TEXAS	DMH Licensed No
CABOOL	MO 65689-9125	Region 1 Medicare/Medicaid	Facility Number 04085
KASEY PAIGE ASSISTED LIVING			
3715 JAMIESON AVE		Telephone (314) 781-0222	Alzheimer's Unit No
SAINT LOUIS	MO 63109-1109	Level of Care: ALF	Bed Capacity 111
Mailing Address 3715 JAMIESON AV	E	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63109-1109	Region 7	Facility Number 04650
KATY MANOR			
205 PROSPECT		Telephone (660) 834-3111	Alzheimer's Unit No
PILOT GROVE	MO 65276-1111	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 8		County COOPER	DMH Licensed No
PILOT GROVE	MO 65276-0008	Region 6 Medicare/Medicaid	Facility Number 14982
KEATON CENTER			
120 N MILL ST		Telephone (636) 232-2323	Alzheimer's Unit No
FESTUS	MO 63028-1816	Level of Care: ALF	Bed Capacity 16
Mailing Address 120 N MILL ST	1.10 00020 1010	County JEFFERSON	DMH Licensed Yes
FESTUS	MO 63028-1816	•	
TESTUS	WIO 03020-1010	Region 2	Facility Number 20413

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KIDWELL HOME				
1000 KIDWELL DR		Telephone (573) 378-5175	Alzheimer's Unit	No
VERSAILLES	MO 65084-1177	Level of Care: RCF*	Bed Capacity	44
Mailing Address 1000 KIDWELL DR		County MORGAN	DMH Licensed	No
VERSAILLES	MO 65084-1177	Region 6	Facility Number	21631
		region 5	,	21001
KINGDOM CARE SENIOR LIVING	LLC			
811 CENTER ST		Telephone (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: SNF	Bed Capacity	36
Mailing Address 811 CENTER ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-1922	Region 6 Medicare/Medicaid	Facility Number	18735
KINGDOM CARE SENIOR LIVING	LLC			
811 CENTER ST	— -	Telephone (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: ALF	Bed Capacity	41
Mailing Address 811 CENTER ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-1922	Region 6	Facility Number	18735
			·	
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST		Telephone (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: ICF	Bed Capacity	36
Mailing Address 620 WEST BOULEV	ARD ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST	1.0	Telephone (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: RCF*	Bed Capacity	12
Mailing Address 620 WEST BOULEV		County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
KINGSLAND WALK SENIOR LIVIN	NG			
868 KINGSLAND AVENUE		Telephone (314) 955-6884	Alzheimer's Unit	Yes
UNIVERSITY CITY	MO 63130-3181	Level of Care: ALF**	Bed Capacity	70
Mailing Address 868 KINGSLAND AV	VENUE	County SAINT LOUIS COUNTY	DMH Licensed	No
UNIVERSITY CITY	MO 63130-3181	Region 7	Facility Number	32203
KINGSWOOD				
1111 (05) (052				
10000 WORNALL RD		Telephone (816) 942-0994	Alzheimer's Unit	Yes
	MO 64114-4359	Telephone (816) 942-0994 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 67
10000 WORNALL RD		• '		
10000 WORNALL RD KANSAS CITY		Level of Care: ALF**	Bed Capacity	67
10000 WORNALL RD KANSAS CITY Mailing Address 10000 WORNALL R	D	Level of Care: ALF** County JACKSON	Bed Capacity DMH Licensed	67 Yes
10000 WORNALL RD KANSAS CITY Mailing Address 10000 WORNALL R KANSAS CITY	D	Level of Care: ALF** County JACKSON	Bed Capacity DMH Licensed	67 Yes
10000 WORNALL RD KANSAS CITY Mailing Address 10000 WORNALL RI KANSAS CITY KINGSWOOD	D	Level of Care: ALF** County JACKSON Region 3	Bed Capacity DMH Licensed Facility Number	67 Yes 04152
10000 WORNALL RD KANSAS CITY Mailing Address 10000 WORNALL RI KANSAS CITY KINGSWOOD 10000 WORNALL RD	D MO 64114-4359 MO 64114-4359	Level of Care: ALF** County JACKSON Region 3 Telephone (816) 942-0994	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	67 Yes 04152 Yes
10000 WORNALL RD KANSAS CITY Mailing Address 10000 WORNALL R KANSAS CITY KINGSWOOD 10000 WORNALL RD KANSAS CITY	D MO 64114-4359 MO 64114-4359	Level of Care: ALF** County JACKSON Region 3 Telephone (816) 942-0994 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	67 Yes 04152 Yes 86

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KIRKSVILLE MANOR CARE CEN	TER		
1705 EAST LAHARPE		Telephone (660) 665-3774	Alzheimer's Unit No
KIRKSVILLE	MO 63501-3927	Level of Care: SNF	Bed Capacity 132
Mailing Address 1705 EAST LAHAR	PE	County ADAIR	DMH Licensed No
KIRKSVILLE	MO 63501-3927	Region 5 Medicare/Medicaid	Facility Number 04161
KNOX COUNTY NURSING HOME	DISTRICT		
55774 STATE HIGHWAY 6		Telephone (660) 397-2282	Alzheimer's Unit No
EDINA	MO 63537-4253	Level of Care: SNF	Bed Capacity 60
Mailing Address 55774 STATE HIGH		County KNOX	DMH Licensed No
EDINA	MO 63537-4253	Region 5 Medicare/Medicaid	Facility Number 04173
LDINA	WO 03337-4233	Region 5 Wedicare/Medicaid	racinty Number 04173
T I DELL'I L'ALLIAN GLADE GENERAL	_		
LA BELLE MANOR CARE CENTE	К	T 1 1 (650) 212 222 1	A11
1002 CENTRAL	NO (2447, 2002	Telephone (660) 213-3234	Alzheimer's Unit Yes
LA BELLE	MO 63447-2092	Level of Care: SNF	Bed Capacity 94
Mailing Address 1002 CENTRAL		County LEWIS	DMH Licensed No
LA BELLE	MO 63447-2092	Region 5 Medicare/Medicaid	Facility Number 04212
LA BONNE MAISON-ASSISTED LI	VING BY AMERICARE		
226 PLAZA DR		Telephone (573) 472-2546	Alzheimer's Unit No
SIKESTON	MO 63801-5105	Level of Care: ALF**	Bed Capacity 30
Mailing Address 226 PLAZA DR		County SCOTT	DMH Licensed No
SIKESTON	MO 63801-5105	Region 2	Facility Number 28804
LA PLATA NURSING HOME			
100 OLD STAGECOACH RD		Telephone (660) 332-4315	Alzheimer's Unit No
LA PLATA	MO 63549-1362	Level of Care: SNF	Bed Capacity 52
Mailing Address 100 OLD STAGECO	OACH RD	County MACON	DMH Licensed No
LA PLATA	MO 63549-1362	Region 5 Medicare/Medicaid	Facility Number 04395
LACLEDE COMMONS			
727 S LACLEDE STATION RD		Telephone (314) 968-5570	Alzheimer's Unit Yes
SAINT LOUIS	MO 63119-4911	Level of Care: ALF**	Bed Capacity 242
Mailing Address 727 S LACLEDE ST	ATION RD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63119-4911	Region 7	Facility Number 17713
			·
LACOBA HOMES, INC			
850 HIGHWAY 60		Telephone (417) 235-7895	Alzheimer's Unit No
MONETT	MO 65708-9376	Level of Care: SNF	Bed Capacity 79
Mailing Address PO BOX 885	35,00 /5,0	County BARRY	DMH Licensed No
MONETT	MO 65708-0885	•	
WORLI	110 03/00-0003	Region 1 Medicare/Medicaid	Facility Number 04315
LAKE GEORGE ASSISTED LIVING	G.		
5000 E RICHLAND RD	G	Telephone (573) 442-0577	Alzheimer's Unit No
COLUMBIA	MO 65201-9606	Level of Care: ALF**	Bed Capacity 10
Mailing Address 5000 EAST RICHLA		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-9606	•	Facility Number 28997
COLUMBIA	WIO 03201-9000	Region 6	Facility Number 2899/

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LAKE PARKE SENIOR LIVING			
145 4TH ST	160	Telephone (573) 745-0874	Alzheimer's Unit No
CAMDENTON	MO 65020-7138	Level of Care: RCF	Bed Capacity 48
Mailing Address 145 4TH ST		County CAMDEN	DMH Licensed No
CAMDENTON	MO 65020-7138	Region 6	Facility Number 30084
LAKE ST CHARLES ASSISTED LIV	VINIC ADADTMENTS		
45 HONEY LOCUST LN	ING AFARTMENTS	Telephone (636) 947-1100	Alzheimer's Unit No
SAINT CHARLES	MO 63303-5711	Level of Care: ALF	Bed Capacity 50
Mailing Address 45 HONEY LOCUST		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63303-5711	Region 5	Facility Number 18030
SAINI CHARLES	WO 03303-3711	Kegion 5	racinty Number 18030
LAKE STOCKTON HEALTHCARE	FACILITY		
1523 3RD ROAD		Telephone (417) 276-5126	Alzheimer's Unit Yes
STOCKTON	MO 65785-9608	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 945		County CEDAR	DMH Licensed No
STOCKTON	MO 65785-0945	Region 1 Medicare/Medicaid	Facility Number 07680
LAKESHORES RESIDENTIAL CAR	E FACILITY		
102 SOUTH BOLIVAR RD		Telephone (417) 754-2272	Alzheimer's Unit No
HUMANSVILLE	MO 65674-8553	Level of Care: RCF*	Bed Capacity 30
Mailing Address PO BOX 221		County POLK	DMH Licensed Yes
HUMANSVILLE	MO 65674-0221	Region 1	Facility Number 15309
LAKESIDE MANOR		T. 1. 1. (660) 400 0050	
810 KENNEDY DRIVE	NO 65255 2011	Telephone (660) 438-8850	Alzheimer's Unit No
WARSAW	MO 65355-3044	Level of Care: RCF*	Bed Capacity 35
Mailing Address PO BOX 280	MO (5255 0290	County BENTON	DMH Licensed Yes
WARSAW	MO 65355-0280	Region 6	Facility Number 05970
LAKESIDE MOUNTAIN MANOR			
238 HARMONY HEIGHTS		Telephone (417) 546-5595	Alzheimer's Unit No
FORSYTH	MO 65653-5533	Level of Care: RCF	Bed Capacity 40
Mailing Address 238 HARMONY HEI	GHTS	County TANEY	DMH Licensed Yes
FORSYTH	MO 65653-5533	Region 1	Facility Number 06232
LAKESIDE SUITES			
205 TIMBERLINE DR		Telephone (660) 547-3322	Alzheimer's Unit No
LINCOLN	MO 65338-2007	Level of Care: ALF	Bed Capacity 14
Mailing Address 205 TIMBERLINE D	R	County BENTON	DMH Licensed No
LINCOLN	MO 65338-2007	Region 6	Facility Number 04803
LAKEVIEW HEALTH CARE & REI	HARILITATION CENTER		
1450 ASHLEY RD	ENDERGING CENTER	Telephone (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: RCF*	Bed Capacity 17
Mailing Address 1450 ASHLEY RD	00200 2111	County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2141	Region 6	Facility Number 01602
DOUTTILLE	1110 00200 2171	Acgiun 0	2 denity 1 diniber 01002

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LAKEVIEW HEALTH CARE & REH	HABILITATION CENTER			
1450 ASHLEY RD		Telephone (660) 882-7007	Alzheimer's Unit No	Э
BOONVILLE	MO 65233-2141	Level of Care: SNF	Bed Capacity 60	0
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed No	o
BOONVILLE	MO 65233-2141	Region 6 Medicare/Medicaid	Facility Number 01602	2
LAKEVIEW HEALTH CARE & REH	IARII ITATION CENTED			
1450 ASHLEY RD	IADILITATION CENTER	Telephone (660) 882-7007	Alzheimer's Unit No	0
BOONVILLE	MO 65233-2141	Level of Care: ICF	Bed Capacity 19	
Mailing Address 1450 ASHLEY RD	WIO 03233-2141	County COOPER	DMH Licensed No	
BOONVILLE	MO 65233-2141	Region 6 Medicaid	Facility Number 01602	
BOOKVIELL	WO 03233-2141	Region 0 Medicald	racinty Number 01002	۷
LAKEWOOD - ASSISTED LIVING B	SY AMERICARE			
4685 ROBBERSON AVE		Telephone (417) 881-1411	Alzheimer's Unit Yes	
SPRINGFIELD	MO 65810-1785	Level of Care: ALF**	Bed Capacity 67	7
Mailing Address 4685 ROBBERSON A	AVE	County GREENE	DMH Licensed No	О
SPRINGFIELD	MO 65810-1785	Region 1	Facility Number 23613	3
LAMPLIGHT VILLAGE				
309 LOCUST ST		Telephone (417) 256-2749	Alzheimer's Unit No	О
WEST PLAINS	MO 65775-3906	Level of Care: RCF*	Bed Capacity 32	2
Mailing Address PO BOX 166		County HOWELL	DMH Licensed Ye	s
WEST PLAINS	MO 65775-0166	Region 1	Facility Number 21563	3
I ANDING OF OFFILL ON THE				
LANDING OF O'FALLON, THE		Talanhana (626) 660 0790	Alahaiman'a Unit Va	
1000 LANDING CIRCLE	MO 62204 7647	Telephone (636) 669-0780	Alzheimer's Unit Yes	
SAINT CHARLES	MO 63304-7647	Level of Care: ALF**	Bed Capacity 142	
Mailing Address 1000 LANDING CIRC SAINT CHARLES	MO 63304-7647	County SAINT CHARLES	DMH Licensed No	
SAINI CHARLES	MO 03304-7047	Region 5	Facility Number 31183	1
LANDMARK VILLA ALF				
1101 OZARK AVE		Telephone (417) 962-3700	Alzheimer's Unit No	Э
CABOOL	MO 65689-7362	Level of Care: ALF	Bed Capacity 44	4
Mailing Address 1101 OZARK AVE		County TEXAS	DMH Licensed Ye	S
CABOOL	MO 65689-7362	Region 1	Facility Number 04085	5
LANSDOWNE VILLAGE				
4624 LANSDOWNE AVE		Telephone (314) 351-6888	Alzheimer's Unit Yes	S
SAINT LOUIS	MO 63116-1523	Level of Care: SNF	Bed Capacity 145	
Mailing Address 4624 LANSDOWNE		County SAINT LOUIS CITY	DMH Licensed No	
SAINT LOUIS	MO 63116-1523	Region 7 Medicare/Medicaid	Facility Number 14557	
LAURIE CARE CENTER		m 1 1 (200) 201 201	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
610 HWY O	1.0 (7.00 10.0	Telephone (573) 374-8263	Alzheimer's Unit Yes	
LAURIE DO POW 1060	MO 65038-1068	Level of Care: SNF	Bed Capacity 108	
Mailing Address PO BOX 1068	MO (5020 1050	County MORGAN	DMH Licensed No	
LAURIE	MO 65038-1068	Region 6 Medicare/Medicaid	Facility Number 04449	J

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I AUDIE WNOLL C				
LAURIE KNOLLS 610 HIGHWAY O		Telephone (573) 374-8263	Alzheimer's Unit	No
LAURIE	MO 65038-1068	Level of Care: RCF*	Bed Capacity	66
Mailing Address PO BOX 1068	112 03030 1000	County MORGAN	DMH Licensed	No
LAURIE	MO 65038-1068	Region 6	Facility Number	04449
		Region		0,
LAVERNA SENIOR LIVING				
904 HALL AVE		Telephone (816) 324-3185	Alzheimer's Unit	Yes
SAVANNAH	MO 64485-1952	Level of Care: SNF	Bed Capacity	120
Mailing Address 904 HALL AVE		County ANDREW	DMH Licensed	No
SAVANNAH	MO 64485-1952	Region 4 Medicare/Medicaid	Facility Number	04478
LAWRENCE COUNTY MANOR				
915 CARL ALLEN ST		Telephone (417) 466-2183	Alzheimer's Unit	Yes
MT VERNON	MO 65712-1612	Level of Care: SNF	Bed Capacity	90
Mailing Address 915 CARL ALLEN S		County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1612	Region 1 Medicare/Medicaid	Facility Number	04349
LAWRENCE COUNTY RESIDENTI	AL CARE CENTER			
915 CARL ALLEN ST		Telephone (417) 466-2183	Alzheimer's Unit	No
MT VERNON	MO 65712-1612	Level of Care: RCF*	Bed Capacity	30
Mailing Address 915 CARL ALLEN S		County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1612	Region 1	Facility Number	04349
		Region	Tuesting Transpor	01317
LAWSON MANOR & REHAB				
210 WEST 8TH TERRACE		Telephone (816) 580-3269	Alzheimer's Unit	Yes
LAWSON	MO 64062-9357	Level of Care: SNF	Bed Capacity	60
Mailing Address 210 WEST 8TH TER	RACE	County RAY	DMH Licensed	No
LAWSON	MO 64062-9357	Region 4 Medicare/Medicaid	Facility Number	07395
LEBANON NORTH NURSING & RI	THAR			
596 MORTON RD	- 	Telephone (417) 532-9173	Alzheimer's Unit	Yes
LEBANON	MO 65536-3648	Level of Care: SNF	Bed Capacity	180
Mailing Address 596 MORTON RD	3.20 00000 0010	County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-3648	Region 1 Medicare/Medicaid	Facility Number	04369
LEBANON SOUTH NURSING & RE	CHAB			
514 WEST FREMONT ROAD		Telephone (417) 532-5351	Alzheimer's Unit	No
LEBANON	MO 65536-4244	Level of Care: SNF	Bed Capacity	116
Mailing Address 514 WEST FREMON		County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-4244	Region 1 Medicare/Medicaid	Facility Number	15650
LEBANON SOUTH NURSING & RE	CHAB			
514 WEST FREMONT RD		Telephone (417) 532-5351	Alzheimer's Unit	No
LEBANON	MO 65536-4244	Level of Care: RCF	Bed Capacity	68
Mailing Address 514 WEST FREMON	IT ROAD	County LACLEDE	DMH Licensed	No
· ·		-		
LEBANON	MO 65536-4244	Region 1	Facility Number	15650

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LEE HOUSE SENIOR LIVING LLC				
105 NORTH MILL ST		Telephone (573) 392-5558	Alzheimer's Unit	No
ELDON	MO 65026-1728	Level of Care: RCF	Bed Capacity	53
Mailing Address 105 NORTH MILL S'	Т	County MILLER	DMH Licensed	No
ELDON	MO 65026-1728	Region 6	Facility Number	13089
LEGENDARY NURSING & REHAB	ILITATION LLC			
809 EAST GORDON ST		Telephone (660) 886-2247	Alzheimer's Unit	No
MARSHALL	MO 65340-2811	Level of Care: SNF	Bed Capacity	92
Mailing Address 809 EAST GORDON		County SALINE	DMH Licensed	No
MARSHALL	MO 65340-2811		Facility Number	04895
WARSHALL	WIO 03340-2811	Region 5 Medicare/Medicaid	Facinty Number	04893
LEICHDE LIVING				
LEISURE LIVING 305 5TH ST		Telephone (417) 235-5959	Alzheimer's Unit	No
	MO (5709 2212	• '		
MONETT	MO 65708-2312		Bed Capacity	20 V
Mailing Address 305 5TH ST	NO. (5700 2012	County BARRY	DMH Licensed	Yes
MONETT	MO 65708-2312	Region 1	Facility Number	18227
LENOIR HEALTH CARE CENTER				
3850 CARTWRIGHT LANE		Telephone (573) 876-5800	A lada aira and a TT-24	No
	MO (5201 7770	. ,	Alzheimer's Unit	
COLUMBIA 2050 CAPTIVIDICHT	MO 65201-7779	Level of Care: SNF	Bed Capacity	100
Mailing Address 3850 CARTWRIGHT		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-7779	Region 6 Medicare/Medicaid	Facility Number	04750
LENOIR MANOR				
3850 CARTWRIGHT LANE		Telephone (573) 876-5800	Alzheimer's Unit	Yes
COLUMBIA	MO 65201-	Level of Care: ALF**	Bed Capacity	92
Mailing Address 3850 CARTWRIGHT		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-	Region 6	Facility Number	04750
COLUMBIA	WIO 03201-	Kegion 0	Facinty Number	04730
LEONA HOUSE				
5000 NW OLD TRAIL ROAD		Telephone (816) 584-1033	Alzheimer's Unit	Yes
KANSAS CITY	MO 64151-1946	Level of Care: ALF**	Bed Capacity	7
Mailing Address 5000 NW OLD TRAI	L RD	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64151-1946	Region 4	Facility Number	24748
		Region		217.10
LEVERING REGIONAL HEALTH (CARE CENTER			
1734 MARKET ST		Telephone (573) 221-2930	Alzheimer's Unit	No
HANNIBAL	MO 63401-4025	Level of Care: SNF	Bed Capacity	179
Mailing Address 1734 MARKET ST		County MARION	DMH Licensed	No
HANNIBAL	MO 63401-4025	Region 5 Medicare/Medicaid	Facility Number	15954
LEVERING REGIONAL HEALTH (1734 MARKET ST	CARE CENTER	Telephone (573) 221-2930	Alzheimer's Unit	No
HANNIBAL	MO 63401-4025	Level of Care: RCF*	Bed Capacity	35
Mailing Address 1734 MARKET ST	110 03701-7023	County MARION	DMH Licensed	Yes
HANNIBAL	MO 63401 4025	·		
HANNIDAL	MO 63401-4025	Region 5	Facility Number	15954

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LEWIS & CLARK GARDENS					
1221 BOONES LICK RD		Telephone	(636) 946-6140	Alzheimer's Unit	No
SAINT CHARLES MO 633	301-2328	Level of Care:	SNF	Bed Capacity	142
Mailing Address 1221 BOONES LICK RD		County SA	INT CHARLES	DMH Licensed	No
SAINT CHARLES MO 633	301-2328	Region 5	Medicare/Medicaid	Facility Number	01266
		8			
LEWIS COUNTY NURSING HOME DISTRIC	Т				
17528 STATE HIGHWAY 81 N		Telephone	(573) 288-4454	Alzheimer's Unit	Yes
		Level of Care:	SNF	Bed Capacity	120
Mailing Address PO BOX 266			WIS	DMH Licensed	No
9			Medicare/Medicaid	Facility Number	04790
Chiller in the second	133 0200	Region 5	vieuicai e/wieuicaiu	racincy ramber	04770
LICKING RESIDENTIAL CARE					
225 WEST HIGHWAY 32		Telephone	(573) 674-2207	Alzheimer's Unit	No
		Level of Care:	RCF*	Bed Capacity	34
Mailing Address 225 WEST HIGHWAY 32			XAS	DMH Licensed	No.
g .		Region 1		Facility Number	24302
		region -			21302
LIFE CARE CENTER OF BRIDGETON					
12145 BRIDGETON SQUARE DR		Telephone	(314) 298-7444	Alzheimer's Unit	No
BRIDGETON MO 630	044-2616	Level of Care:	SNF	Bed Capacity	91
Mailing Address 12145 BRIDGETON SQUARE I	DR	County SA	INT LOUIS COUNTY	DMH Licensed	No
BRIDGETON MO 630	044-2616	Region 7	Medicare/Medicaid	Facility Number	12141
		C .		•	
LIFE CARE CENTER OF BROOKFIELD					
315 HUNT ST		Telephone	(660) 258-3367	Alzheimer's Unit	Yes
		Level of Care:	SNF	Bed Capacity	120
Mailing Address 315 HUNT ST		County LIN		DMH Licensed	No
		•		Facility Number	00822
BROOKFIELD MO 040	020-2412	Region 5	Medicare/Medicaid	Facility Number	00822
LIFE CARE CENTER OF CAPE GIRARDEAU	IJ				
365 SOUTH BROADVIEW ST		Telephone	(573) 335-2086	Alzheimer's Unit	No
CAPE GIRARDEAU MO 633		Level of Care:	SNF	Bed Capacity	120
Mailing Address 365 SOUTH BROADVIEW ST		County CA	PE GIRARDEAU	DMH Licensed	No
		-	Medicare/Medicaid	Facility Number	01032
				·	
LIFE CARE CENTER OF CARROLLTON					
300 LIFE CARE LN		Telephone	(660) 542-0155	Alzheimer's Unit	Yes
CARROLLTON MO 646	633-1861	Level of Care:	SNF	Bed Capacity	120
Mailing Address 300 LIFE CARE LN		County CA	RROLL	DMH Licensed	No
CARROLLTON MO 646	633-1861	Region 4	Medicare/Medicaid	Facility Number	11500
LIFE CARE CENTER OF GRANDVIEW			(0.1.6) =		
6301 EAST 125TH ST		Telephone	(816) 765-7714	Alzheimer's Unit	Yes
	030-1884	Level of Care:	SNF	Bed Capacity	172
Mailing Address 6301 EAST 125TH ST		County JAC	CKSON	DMH Licensed	No

Medicare/Medicaid

Facility Number

11929

MO 64030-1884

GRANDVIEW

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LIFE CARE CENTER OF ST LOUI	S			
3520 CHOUTEAU AVE		Telephone (314) 771-2100	Alzheimer's Unit	No
SAINT LOUIS	MO 63103-2916	Level of Care: SNF	Bed Capacity	100
Mailing Address 3520 CHOUTEAU A	AVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63103-2916	Region 7 Medicare/Medicaid	Facility Number	19823
LIFE CARE CENTER OF SULLIVA	AN			
875 DUNSFORD DR		Telephone (573) 468-3128	Alzheimer's Unit	No
SULLIVAN	MO 63080-1238	Level of Care: SNF	Bed Capacity	120
Mailing Address 875 DUNSFORD DI	₹	County FRANKLIN	DMH Licensed	No
SULLIVAN	MO 63080-1238	Region 6 Medicare/Medicaid	Facility Number	07744
			•	
LIFE CARE CENTER OF WAYNES	SVILLE	F. 1. 1. (550) 554 645 6		**
700 BIRCH LN	NO. (5500 2005	Telephone (573) 774-6456	Alzheimer's Unit	Yes
WAYNESVILLE	MO 65583-2275	Level of Care: SNF	Bed Capacity	120
Mailing Address 700 BIRCH LN	NO. (5500 2005	County PULASKI	DMH Licensed	No
WAYNESVILLE	MO 65583-2275	Region 6 Medicare/Medicaid	Facility Number	04592
LIFE ENHANCEMENT VILLAGE	OF THE OZARKS INC			
732 SOUTH GREGG ROAD		Telephone (417) 725-6680	Alzheimer's Unit	No
NIXA	MO 65714-7419	Level of Care: RCF*	Bed Capacity	44
Mailing Address 732 SOUTH GREGO	G RD	County CHRISTIAN	DMH Licensed	Yes
NIXA	MO 65714-7419	Region 1	Facility Number	14190
I INCOLN COMMUNITY CARE C	INTER			
LINCOLN COMMUNITY CARE CI	ENTER	Telephone (660) 547-3322	Alzheimer's Unit	No
205 TIMBERLINE DR		Telephone (660) 547-3322 Level of Care: SNF	Alzheimer's Unit	No 66
205 TIMBERLINE DR LINCOLN	MO 65338-2007	Level of Care: SNF	Bed Capacity	66
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I	MO 65338-2007 DR	Level of Care: SNF County BENTON	Bed Capacity DMH Licensed	66 No
205 TIMBERLINE DR LINCOLN	MO 65338-2007	Level of Care: SNF	Bed Capacity	66
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I	MO 65338-2007 DR	Level of Care: SNF County BENTON	Bed Capacity DMH Licensed	66 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F	MO 65338-2007 DR MO 65338-2007	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	66 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST	MO 65338-2007 DR MO 65338-2007	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	66 No 04803 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F	MO 65338-2007 DR MO 65338-2007	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	66 No 04803
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	66 No 04803 No 90 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY	MO 65338-2007 DR MO 65338-2007	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	66 No 04803 No 90
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	66 No 04803 No 90 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	66 No 04803 No 90 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE I LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No 15750
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520 MO 63379-0130	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No 15750
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS	MO 65338-2007 DR MO 65338-2007 REHAB MO 63379-1520 MO 63379-0130	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF* County SAINT LOUIS CITY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	66 No 04803 No 90 No 15750
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & B 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS Mailing Address PO BOX 525	MO 65338-2007 NEHAB MO 63379-1520 MO 63379-0130 MO 63108-2702	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	66 No 04803 No 90 No 15750
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS Mailing Address PO BOX 525 CUBA	MO 65338-2007 NEHAB MO 63379-1520 MO 63379-0130 MO 63108-2702	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF* County SAINT LOUIS CITY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	66 No 04803 No 90 No 15750
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS Mailing Address PO BOX 525 CUBA LINDEN WOODS VILLAGE	MO 65338-2007 NEHAB MO 63379-1520 MO 63379-0130 MO 63108-2702	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF* County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No 15750 No 20 Yes 10470
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS Mailing Address PO BOX 525 CUBA LINDEN WOODS VILLAGE 2901 NE 72ND STREET	MO 65338-2007 OR MO 65338-2007 REHAB MO 63379-1520 MO 63379-0130 MO 63108-2702 MO 65453-	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF* County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No 15750 No 20 Yes 10470
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS Mailing Address PO BOX 525 CUBA LINDEN WOODS VILLAGE 2901 NE 72ND STREET GLADSTONE	MO 65338-2007 OR MO 65338-2007 REHAB MO 63379-1520 MO 63379-0130 MO 63108-2702 MO 65453- MO 64119-7400	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF* County SAINT LOUIS CITY Region 7 Telephone (816) 268-4000 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No 15750 No 20 Yes 10470
205 TIMBERLINE DR LINCOLN Mailing Address 205 TIMBERLINE II LINCOLN LINCOLN COUNTY NURSING & F 1145 EAST CHERRY ST TROY Mailing Address PO BOX 130 TROY LINDELL MANOR 4336 LINDELL BLVD SAINT LOUIS Mailing Address PO BOX 525 CUBA LINDEN WOODS VILLAGE 2901 NE 72ND STREET	MO 65338-2007 OR MO 65338-2007 REHAB MO 63379-1520 MO 63379-0130 MO 63108-2702 MO 65453- MO 64119-7400	Level of Care: SNF County BENTON Region 6 Medicare/Medicaid Telephone (636) 528-5712 Level of Care: SNF County LINCOLN Region 5 Medicare/Medicaid Telephone (314) 652-4828 Level of Care: RCF* County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 04803 No 90 No 15750 No 20 Yes 10470

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LINDEN WOODS VILLAGE			
LINDEN WOODS VILLAGE 2901 NE 72ND STREET		Telephone (816) 268-4000	Alzheimer's Unit No
	MO 64119-7400	Level of Care: ALF**	Bed Capacity 40
Mailing Address 2901 NE 72ND STREET		County CLAY	DMH Licensed No
O .	MO 64119-7400	Region 4	Facility Number 30156
OL/LDSTOILE .	.10 0411) /400	region 4	racincy ramper 50150
LINN OAK REHABILITATION CENT	ER	TEMPORARY CLO	SURE - STAFFING
196 HIGHWAY CC		Telephone (573) 897-0700	Alzheimer's Unit no
LINN	MO 65051-3500	Level of Care: SNF	Bed Capacity 132
Mailing Address 196 HIGHWAY CC		County OSAGE	DMH Licensed No
LINN	MO 65051-3500	Region 6 Medicare/Medicaid	Facility Number 14130
I INING GENERA THE			
LIVING CENTER, THE 2506 LINDEN TREE PARKWAY		Telephone (660) 886-9676	Alzheimer's Unit Yes
	MO 65340-0017	Level of Care: SNF	Bed Capacity 99
Mailing Address PO BOX 370	WO 03340-0017	County SALINE	DMH Licensed No
o a constant of the constant o	MO 65340-0370	Region 5 Medicare/Medicaid	Facility Number 21791
WARSHALL	WO 03340-0370	Region 3 Medicare/Medicaid	racinty Number 21/91
LIVING COMMUNITY OF ST JOSEPH	I		
1202 HEARTLAND RD		Telephone (816) 671-8500	Alzheimer's Unit No
SAINT JOSEPH	MO 64506-3200	Level of Care: ALF	Bed Capacity 35
Mailing Address 1202 HEARTLAND RD	1	County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-3200	Region 4	Facility Number 24179
LIVING COMMUNITY OF ST JOSEPH	ī		
1202 HEARTLAND RD	-	Telephone (816) 671-8500	Alzheimer's Unit No
	MO 64506-3200	Level of Care: SNF	Bed Capacity 96
Mailing Address 1202 HEARTLAND RD		County BUCHANAN	DMH Licensed No
	MO 64506-3200	Region 4 Medicare/Medicaid	Facility Number 24179
I WINGGTON MANOR GARE GENTEE	n		
LIVINGSTON MANOR CARE CENTE	К	T. 1 1 (660) 646 5177	A11
939 E BIRCH DR	MO 64601 2180	Telephone (660) 646-5177 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 94
	MO 64601-2189		
Mailing Address 939 E BIRCH DR CHILLICOTHE	MO 64601-2189	•	DMH Licensed No Facility Number 20099
CHILLICOTHE	WO 04001-2189	Region 4 Medicare/Medicaid	Facility Number 20099
LOCH HAVEN			
701 SUNSET HILLS DR		Telephone (660) 385-3113	Alzheimer's Unit Yes
MACON	MO 63552-2165	Level of Care: SNF	Bed Capacity 160
Mailing Address PO BOX 187		County MACON	DMH Licensed No
MACON	MO 63552-0187	Region 5 Medicare/Medicaid	Facility Number 04739
LOCH HAVEN			
701 SUNSET HILLS DR		Telephone (660) 385-3113	Alzheimer's Unit No
	MO 63552-2165	Level of Care: RCF*	Bed Capacity 26
Mailing Address PO BOX 187		County MACON	DMH Licensed No

Facility Number

04739

MO 63552-0187

MACON

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LODGE DECIDENTIAL CARE EACH				
LODGE RESIDENTIAL CARE FACI	LITY, THE			
3860 EAST 60TH ST		Telephone (816) 599-5235	Alzheimer's Unit	No
KANSAS CITY	MO 64130-4418	Level of Care: RCF	Bed Capacity	8
Mailing Address 3860 EAST 60TH ST		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64130-4418	Region 3	Facility Number	16211
LODGE, THE				
542 STATE ROAD DD		Telephone (660) 248-2277	Alzheimer's Unit	No
FAYETTE	MO 65248-9658	Level of Care: ALF**	Bed Capacity	60
Mailing Address 542 STATE RD DD		County HOWARD	DMH Licensed	Yes
FAYETTE	MO 65248-9658	Region 5	Facility Number	28815
LODGES, THE				
2401 W GRAND ST		Telephone (417) 864-4545	Alzheimer's Unit	No
SPRINGFIELD	MO 65802-4967	Level of Care: RCF*	Bed Capacity	99
Mailing Address 2401 W GRAND ST		County GREENE	DMH Licensed	Yes
SPRINGFIELD	MO 65802-4967	Region 1	Facility Number	09756
LOWING ADMINISTRAÇÃO CARROLLA	ND ACCICIDED I WING			
LOVING ARMS MEMORY CARE A	ND ASSISTED LIVING	m 1 1 (660) 951 9966	A11	_
1300 EAST 24TH ST	MO (5201 9222	Telephone (660) 851-2266	Alzheimer's Unit	yes
SEDALIA	MO 65301-8233	Level of Care: ALF**	Bed Capacity	20
Mailing Address 1300 EAST 24TH ST		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-8233	Region 6	Facility Number	15971
LUTHER MANOR RETIREMENT &	NURSING CENTER			
3170 HIGHWAY 61 NORTH	71(01001) 0 0D1(1201	Telephone (573) 221-5533	Alzheimer's Unit	No
HANNIBAL	MO 63401-6571	Level of Care: SNF	Bed Capacity	64
				04
Mailing Address 3170 HWY 61 NORT	Н	County MARION	DMH Licensed	
Mailing Address 3170 HWY 61 NORT HANNIBAL		County MARION Region 5 Medicare/Medicaid	DMH Licensed Facility Number	No
Mailing Address 3170 HWY 61 NORT HANNIBAL	Н МО 63401-6571	County MARION Region 5 Medicare/Medicaid	DMH Licensed Facility Number	
•	MO 63401-6571	·		No
HANNIBAL	MO 63401-6571	·		No
HANNIBAL LUTHERAN CONVALESCENT HON	MO 63401-6571	Region 5 Medicare/Medicaid	Facility Number	No 04673
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD	MO 63401-6571 ME MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570	Facility Number Alzheimer's Unit	No 04673
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES	MO 63401-6571 ME MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF	Facility Number Alzheimer's Unit Bed Capacity	No 04673 No 286
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED	MO 63401-6571 ME MO 63119-4911 DE STATION RD	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 04673 No 286 No
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 04673 No 286 No
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (660) 463-2267	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 04673 No 286 No
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 04673 No 286 No 04695
HANNIBAL LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (660) 463-2267	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 04673 No 286 No 04695
LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST CONCORDIA	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (660) 463-2267 Level of Care: ALF**	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 04673 No 286 No 04695
LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST CONCORDIA Mailing Address PO BOX 849 CONCORDIA	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911 DME MO 64020-9643 MO 64020-0849	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (660) 463-2267 Level of Care: ALF** County LAFAYETTE	Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 04673 No 286 No 04695 No 533 No
LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST CONCORDIA Mailing Address PO BOX 849 CONCORDIA LUTHERAN HOME ASSISTED LIVE	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911 DME MO 64020-9643 MO 64020-0849	Region5Medicare/MedicaidTelephone(314) 968-5570Level of Care:SNFCountySAINT LOUIS COUNTYRegion7Medicare/MedicaidTelephone(660) 463-2267Level of Care:ALF**CountyLAFAYETTERegion3	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 04673 No 286 No 04695 No 53 No 27122
LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST CONCORDIA Mailing Address PO BOX 849 CONCORDIA LUTHERAN HOME ASSISTED LIVE 2825 BLOOMFIELD RD	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911 DME MO 64020-9643 MO 64020-0849 ING	Region5Medicare/MedicaidTelephone(314) 968-5570Level of Care:SNFCountySAINT LOUIS COUNTYRegion7Medicare/MedicaidTelephone(660) 463-2267Level of Care:ALF**CountyLAFAYETTERegion3	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 04673 No 286 No 04695 No 53 No 27122
LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST CONCORDIA Mailing Address PO BOX 849 CONCORDIA LUTHERAN HOME ASSISTED LIVE 2825 BLOOMFIELD RD CAPE GIRARDEAU	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911 ME MO 64020-9643 MO 64020-0849 ING MO 63703-6335	Region 5 Medicare/Medicaid Telephone (314) 968-5570 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (660) 463-2267 Level of Care: ALF** County LAFAYETTE Region 3 Telephone (573) 335-0158 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 04673 No 286 No 04695 No 27122
LUTHERAN CONVALESCENT HON 723 SOUTH LACLEDE STATION RD WEBSTER GROVES Mailing Address 723 SOUTH LACLED WEBSTER GROVES LUTHERAN GOOD SHEPHERD HO 202 S WEST ST CONCORDIA Mailing Address PO BOX 849 CONCORDIA LUTHERAN HOME ASSISTED LIVE 2825 BLOOMFIELD RD	MO 63401-6571 ME MO 63119-4911 DE STATION RD MO 63119-4911 ME MO 64020-9643 MO 64020-0849 ING MO 63703-6335	Region5Medicare/MedicaidTelephone(314) 968-5570Level of Care:SNFCountySAINT LOUIS COUNTYRegion7Medicare/MedicaidTelephone(660) 463-2267Level of Care:ALF**CountyLAFAYETTERegion3	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 04673 No 286 No 04695 No 53 No 27122

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LUTHERAN HOME, THE				
2825 BLOOMFIELD RD		Telephone (573) 335-0158	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63703-6335	Level of Care: SNF	Bed Capacity	274
Mailing Address 2825 BLOOMFIELD) RD	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-6335	Region 2 Medicare/Medicaid	Facility Number 13	3536
LUTHERAN NURSING HOME				
202 S WEST ST		Telephone (660) 463-2267	Alzheimer's Unit	Yes
CONCORDIA	MO 64020-9643	Level of Care: SNF		113
Mailing Address PO BOX 849	116 0.020 90.10	County LAFAYETTE	DMH Licensed	No
CONCORDIA	MO 64020-0849	Region 3 Medicare/Medicaid		1705
661,661.22	1120 0.1020 00.19	region 5 Medical Civicultand	ruenity runnoer	1703
LUTHERAN SENIOR SERVICES A	T BREEZE PARK			
600 BREEZE PARK DR		Telephone (636) 939-5223	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-9139	Level of Care: SNF	Bed Capacity	81
Mailing Address 600 BREEZE PARK		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region 5 Medicare/Medicaid	Facility Number 20	0704
LUTHERAN SENIOR SERVICES A	T BREEZE PARK			
600 BREEZE PARK DR		Telephone (636) 939-5223	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63304-9139	Level of Care: ALF**	Bed Capacity	23
Mailing Address 600 BREEZE PARK		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region 5		0704
LUTHERAN SENIOR SERVICES A	T BREEZE PARK			
600 BREEZE PARK DR		Telephone (636) 939-5223	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-9139	Level of Care: ALF	Bed Capacity	56
Mailing Address 600 BREEZE PARK		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number 20)704
LUTHERAN SENIOR SERVICES A	T MERAMEC BLUFFS			
50 MERAMEC TRAIL DR		Telephone (636) 861-0600	Alzheimer's Unit	Yes
BALLWIN	MO 63021-3303	Level of Care: ALF**	Bed Capacity	100
Mailing Address 50 MERAMEC TRA	AIL DR	County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7	Facility Number 23	3643
LUTHERAN SENIOR SERVICES A	T MED AMEC DI LIEES			
	I MERAMEC BLUFFS	T-l (626) 961 0600	A 1-1	Vac
50 MERAMEC TRAIL DR	MO (2021 2202	Telephone (636) 861-0600		Yes
BALLWIN	MO 63021-3303	Level of Care: SNF		128
Mailing Address 50 MERAMEC TRA		County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7 Medicare/Medicaid	Facility Number 23	3643
LYNN'S HERITAGE HOUSE, INC				
800 KELLY LN		Telephone (573) 754-4020	Alzheimer's Unit	Yes
LOUISIANA	MO 63353-2415	Level of Care: ALF**	Bed Capacity	44
Mailing Address 800 KELLY LN		County PIKE	DMH Licensed	No
LOUISIANA	MO 63353-2415	Region 5	Facility Number 21	1055

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MACON HEALTH CARE CENTER				
29612 KELLOGG AVE		Telephone (660) 385-5797	Alzheimer's Unit	Yes
MACON	MO 63552-3702	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 465	1410 03332-3702	County MACON	DMH Licensed	No
MACON	MO 63552-0465	Region 5 Medicare/Medicaid	Facility Number	04914
WACON	MO 03332-0403	Region 5 Medicare/Medicaid	Facinty Number	04914
MADISON SENIOR LIVING THE				
14001 MADISON AVENUE		Telephone 816-627-1726	Alzheimer's Unit	Yes
KANSAS CITY	MO 64145-1613	Level of Care: ALF**	Bed Capacity	66
Mailing Address 14001 MADISON A	VENUE	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64145-1613	Region 3	Facility Number	32321
MA GNOVA A MONGE				
MAGNOLIA HOUSE		T-1h ((24) 022 0442	A 1-1	NI-
204 GRAND AVE FESTUS	MO 62029 1942	Telephone (636) 933-0662 Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 12
Mailing Address 204 GRAND AVE	MO 63028-1842		DMH Licensed	Yes
FESTUS	MO 63028-1842			
FESTUS	MO 03026-1842	Region 2	Facility Number	13697
MAGNOLIA SQUARE NURSING A	ND REHAB			
1502 WEST EDGEWOOD		Telephone (417) 877-7545	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-3567	Level of Care: SNF	Bed Capacity	120
Mailing Address 1502 WEST EDGEW	/OOD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-3567	Region 1 Medicare/Medicaid	Facility Number	23400
MANOR AT ELEMBALE THE				
MANOR AT ELFINDALE, THE				
		T-lk (417) 921 2272	A 1-1	V
1707 WEST ELFINDALE ST	MO (5907-124)	Telephone (417) 831-2273	Alzheimer's Unit	Yes
1707 WEST ELFINDALE ST SPRINGFIELD	MO 65807-1246	Level of Care: SNF	Bed Capacity	100
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND	PALE ST	Level of Care: SNF County GREENE	Bed Capacity DMH Licensed	100 No
1707 WEST ELFINDALE ST SPRINGFIELD		Level of Care: SNF	Bed Capacity	100
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND	ALE ST MO 65807-1246	Level of Care: SNF County GREENE	Bed Capacity DMH Licensed	100 No
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD	ALE ST MO 65807-1246	Level of Care: SNF County GREENE	Bed Capacity DMH Licensed	100 No
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFINE SPRINGFIELD MANOR GROVE, INCORPORATE	ALE ST MO 65807-1246	Level of Care: SNF County GREENE Region 1 Medicare	Bed Capacity DMH Licensed Facility Number	100 No 17371
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFINE SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD	MO 65807-1246 MO 63122-5928	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	100 No 17371 No
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFINE SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD KIRKWOOD	MO 65807-1246 MO 63122-5928	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	100 No 17371 No 117
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD	MO 65807-1246 MO 65807-1246 MO 63122-5928 COOD RD	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	100 No 17371 No 117 No
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE	MO 65807-1246 MO 65807-1246 MO 63122-5928 COOD RD	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No 06038
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD	MO 65807-1246 MO 65807-1246 MO 63122-5928 COOD RD MO 63122-5928	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD POPLAR BLUFF	MO 65807-1246 MO 65807-1246 MO 63122-5928 COOD RD	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No 06038
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATE 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD	MO 65807-1246 MO 65807-1246 MO 63122-5928 OOD RD MO 63122-5928 MO 63901-1903	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF County BUTLER	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	100 No 17371 No 117 No 06038
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATED 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD POPLAR BLUFF Mailing Address 2071 BARRON RD	MO 65807-1246 MO 65807-1246 MO 63122-5928 COOD RD MO 63122-5928	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	100 No 17371 No 117 No 06038
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATED 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD POPLAR BLUFF Mailing Address 2071 BARRON RD POPLAR BLUFF MAPLE CREST MANOR	MO 65807-1246 MO 65807-1246 MO 63122-5928 OOD RD MO 63122-5928 MO 63901-1903	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No 06038 No 90 No 00683
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATED 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD POPLAR BLUFF Mailing Address 2071 BARRON RD POPLAR BLUFF MAPLE CREST MANOR 430 NORTH FREDERICK STREET	MO 65807-1246 MO 65807-1246 MO 63122-5928 OOD RD MO 63122-5928 MO 63901-1903 MO 63901-1903	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No 06038 No 90 No 00683
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATED 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD POPLAR BLUFF Mailing Address 2071 BARRON RD POPLAR BLUFF MAPLE CREST MANOR 430 NORTH FREDERICK STREET CAPE GIRARDEAU	MO 63807-1246 MO 63122-5928 OOD RD MO 63122-5928 MO 63901-1903 MO 63901-1903 MO 63701-4835	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid Telephone (573) 339-7606 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No 06038 No 90 No 00683
1707 WEST ELFINDALE ST SPRINGFIELD Mailing Address 1707 WEST ELFIND SPRINGFIELD MANOR GROVE, INCORPORATED 711 SOUTH KIRKWOOD RD KIRKWOOD Mailing Address 711 SOUTH KIRKW KIRKWOOD MANOR, THE 2071 BARRON RD POPLAR BLUFF Mailing Address 2071 BARRON RD POPLAR BLUFF MAPLE CREST MANOR 430 NORTH FREDERICK STREET	MO 63807-1246 MO 63122-5928 OOD RD MO 63122-5928 MO 63901-1903 MO 63901-1903 MO 63701-4835	Level of Care: SNF County GREENE Region 1 Medicare Telephone (314) 965-0864 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid Telephone (573) 686-1147 Level of Care: SNF County BUTLER Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 17371 No 117 No 06038 No 90 No 00683

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^{**} Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

MAPLE GROVE LODGE				
2407 KENTUCKY ST		Telephone (573) 754-5456	Alzheimer's Unit	No
LOUISIANA	MO 63353-2503	Level of Care: SNF	Bed Capacity	90
Mailing Address 2407 KENTUCKY S		County PIKE	DMH Licensed	No
LOUISIANA	MO 63353-2503	Region 5 Medicare/Medicaid	Facility Number	05002
MAPLE LAWN NURSING HOME				
1410 WEST LINE ST		Telephone (573) 769-2213	Alzheimer's Unit	No
PALMYRA	MO 63461-1831	Level of Care: SNF	Bed Capacity	110
Mailing Address PO BOX 232	110 03 101 1031	County MARION	DMH Licensed	No
PALMYRA	MO 63461-0232	Region 5 Medicare/Medicaid	Facility Number	09961
MADI E DIDCE DECIDENTIAL CA	DE CENTER LI C			
MAPLE RIDGE RESIDENTIAL CAI 1034 DORIS DR	RE CENTER LLC	Talanhana (572) 760 0155	Alzheimer's Unit	No
FARMINGTON	MO 62640 1054	Telephone (573) 760-0155 Level of Care: RCF*		No 20
	MO 63640-1954		Bed Capacity DMH Licensed	Yes
Mailing Address PO BOX 272 FARMINGTON	MO 62640 0272	·		
FARMINGTON	MO 63640-0272	Region 2	Facility Number	19808
MAPLE SENIOR LIVING LLC				
3 SOUTHWEST FIRST LANE		Telephone (417) 682-6184	Alzheimer's Unit	No
LAMAR	MO 64759-8313	Level of Care: RCF*	Bed Capacity	57
Mailing Address 3 SOUTHWEST FIRS	ST LANE	County BARTON	DMH Licensed	No
LAMAR	MO 64759-8313	Region 1	Facility Number	20869
MADI E TDEE TEDDACE ACCION	ED I IVING DV AMEDICADE			
MAPLE TREE TERRACE - ASSIST	ED LIVING BY AMERICARE	Talanhana (417) 259 7201	Alzhoimon's Unit	No
2510 CLINTON ST		Telephone (417) 358-7201	Alzheimer's Unit	No 50
2510 CLINTON ST CARTHAGE	ED LIVING BY AMERICARE MO 64836-3427	Level of Care: ALF**	Bed Capacity	50
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST	MO 64836-3427	Level of Care: ALF** County JASPER	Bed Capacity DMH Licensed	50 No
2510 CLINTON ST CARTHAGE		Level of Care: ALF**	Bed Capacity	50
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST	MO 64836-3427 MO 64836-3427	Level of Care: ALF** County JASPER	Bed Capacity DMH Licensed	50 No
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE	MO 64836-3427 MO 64836-3427	Level of Care: ALF** County JASPER	Bed Capacity DMH Licensed	50 No
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING	MO 64836-3427 MO 64836-3427	Level of Care: ALF** County JASPER Region 1	Bed Capacity DMH Licensed Facility Number	50 No 17660
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR	MO 64836-3427 MO 64836-3427 BBY AMERICARE MO 63640-1981	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	50 No 17660 Yes
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON	MO 64836-3427 MO 64836-3427 BBY AMERICARE MO 63640-1981	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	50 No 17660 Yes 61
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON	MO 64836-3427 MO 64836-3427 BY AMERICARE MO 63640-1981 Y DR MO 63640-1981	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	50 No 17660 Yes 61 No
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILE	MO 64836-3427 MO 64836-3427 BY AMERICARE MO 63640-1981 Y DR MO 63640-1981	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 17660 Yes 61 No 28635
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON	MO 64836-3427 MO 64836-3427 B BY AMERICARE MO 63640-1981 Y DR MO 63640-1981 TTATION, THE	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 17660 Yes 61 No 28635
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILE 610 WEST SUNSET ST SPRINGFIELD	MO 64836-3427 MO 64836-3427 B BY AMERICARE MO 63640-1981 Y DR MO 63640-1981 TTATION, THE MO 65807-3696	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	50 No 17660 Yes 61 No 28635
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILE 610 WEST SUNSET ST SPRINGFIELD Mailing Address 610 WEST SUNSET	MO 64836-3427 MO 64836-3427 BBY AMERICARE MO 63640-1981 Y DR MO 63640-1981 TTATION, THE MO 65807-3696 ST	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF County GREENE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	50 No 17660 Yes 61 No 28635
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILE 610 WEST SUNSET ST SPRINGFIELD	MO 64836-3427 MO 64836-3427 B BY AMERICARE MO 63640-1981 Y DR MO 63640-1981 TTATION, THE MO 65807-3696	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	50 No 17660 Yes 61 No 28635
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILD 610 WEST SUNSET ST SPRINGFIELD Mailing Address 610 WEST SUNSET SPRINGFIELD MAPLEWOOD, INC	MO 64836-3427 MO 64836-3427 BBY AMERICARE MO 63640-1981 Y DR MO 63640-1981 TTATION, THE MO 65807-3696 ST	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF County GREENE Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 17660 Yes 61 No 28635 No 120 No 06441
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILE 610 WEST SUNSET ST SPRINGFIELD Mailing Address 610 WEST SUNSET SPRINGFIELD MAPLEWOOD, INC 1827 CRADER DR	MO 64836-3427 MO 64836-3427 BY AMERICARE MO 63640-1981 Y DR MO 63640-1981 STATION, THE MO 65807-3696 ST MO 65807-3696	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF County GREENE Region 1 Medicare/Medicaid Telephone (573) 635-0023	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 17660 Yes 61 No 28635 No 120 No 06441
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILD 610 WEST SUNSET ST SPRINGFIELD Mailing Address 610 WEST SUNSET SPRINGFIELD MAPLEWOOD, INC 1827 CRADER DR JEFFERSON CITY	MO 64836-3427 MO 64836-3427 BBY AMERICARE MO 63640-1981 Y DR MO 63640-1981 TTATION, THE MO 65807-3696 ST	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF County GREENE Region 1 Medicare/Medicaid Telephone (573) 635-0023 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 17660 Yes 61 No 28635 No 120 No 06441
2510 CLINTON ST CARTHAGE Mailing Address 2510 CLINTON ST CARTHAGE MAPLEBROOK-ASSISTED LIVING 520 MAPLE VALLEY DR FARMINGTON Mailing Address 520 MAPLE VALLE FARMINGTON MAPLES HEALTH AND REHABILE 610 WEST SUNSET ST SPRINGFIELD Mailing Address 610 WEST SUNSET SPRINGFIELD MAPLEWOOD, INC 1827 CRADER DR	MO 64836-3427 MO 64836-3427 BY AMERICARE MO 63640-1981 Y DR MO 63640-1981 STATION, THE MO 65807-3696 ST MO 65807-3696	Level of Care: ALF** County JASPER Region 1 Telephone (573) 756-2777 Level of Care: ALF** County SAINT FRANCOIS Region 2 Telephone (417) 891-1700 Level of Care: SNF County GREENE Region 1 Medicare/Medicaid Telephone (573) 635-0023	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	50 No 17660 Yes 61 No 28635 No 120 No 06441

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Telephone	MADI EWOOD INC			
BAPTERSON CITY	MAPLEWOOD, INC		Talanhana (572) 625 0022	Algheimen's Unit No.
MARIAN CLIFF RESIDENTIAL CARE CENTER LLC SPENDING 1900 (2017) SAINT LOUIS COUNTY MO 6570-930 (2017) SAINT LOUIS COUNTY MO 6580-3-630 (2017) SAINT LOUIS COUNTY SAINT LEGENS (2017) S		MO 65100 2005	• '	
MARANATHA VILLAGE, INC 233 EAST NORTON RD MO 65803-3633 Level of Cares SNF Bed Capacity 120 Modern Mod		WIO 03109-2003		
MARANATHA VILLAGE, INC 233 EAST NORTON RD Telephone (417) 833-0016 Alzheimer's Unit No SPRINGFIELD MO 65803-3633 Level of Care: SNF Bed Capacity 120 DMH Licensed No SPRINGFIELD MO 65803-3633 Level of Care: SNF Bed Capacity 120 DMH Licensed No SPRINGFIELD MO 65803-3633 Region Medicare/Medicaid Pacility Number 04907	_	MO 65109-2005	- · · · · · · · · · · · · · · · · · · ·	
SAST NORTON RD	JETTERSON CITT	WIO 03109-2003	Kegion 0	racinty Number 10904
SAST NORTON RD	MARANATHA VILLAGE, INC			
SPENC Mo 6803-3633 Level of Carre SNF Bed Capacity 120 Mailing Address 233 EAST NORTON RD MO 65803-3633 Region Medicare/Medicaid Facility Number 04907 Medicare/Medicaid Medicare/Medicaid Facility Number 04907 Medicare/Medicaid Med			Telephone (417) 833-0016	Alzheimer's Unit No
Malling Address 233 EAST NORTON RD	SPRINGFIELD	MO 65803-3633	=	Bed Capacity 120
SPRINGFIELD	Mailing Address 233 EAST NORTON RI	D	County GREENE	- · · · · · · · · · · · · · · · · · · ·
Telephone (417) 833-0016 Alzheimer's Unit No SPRINGFIELD MO 65803-3633 Level of Care: RCF Bed Capacity 29 MARI	_		·	Facility Number 04907
Telephone (417) 833-0016 Alzheimer's Unit No SPRINGFIELD MO 65803-3633 Level of Care: RCF Bed Capacity 29				
SPRINGFIELD			T. I (417) 922 0016	A11.
Mailing Address 233 EAST NORTON RD		MO (5902-2622	• '	
SPRINGFIELD MO 65803-3633 Region Facility Number 04907				
MARI DE VILLA RETIREMENT CENTER, INC 13900 CLAYTON RD Telephore (636) 227-5347 Alzheimer's Unit No TOWN AND COUNTRY MO 63017-8406 Level of Care: SNF Bed Capacity 224 Mailing Address 13900 CLAYTON RD MARIAN CLIFF RESIDENTIAL CARE CENTER LLC 381 ELM ST Telephore (573) 543-2218 Alzheimer's Unit No SAINT MARY MO 63673-9330 Level of Care: RCF* Bed Capacity 666 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272 Region 2 Ball-Park No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephore (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE MARK TWAIN CARING CENTER MARK TWAIN CARING CENTER MO 63901-1942 Level of Care: SNF Bed Capacity 98 Mailing Address MO Alzheimer's Unit No MOBERLY MO 63901-1942 Segion 5 Facility Number 16369 MARK TWAIN CARING CENTER 3001 MAY ST Felephore (573) 686-6999 Alzheimer's Unit No Bed Capacity 126 Malling Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 Mailing Address 3001 MAY ST SNF Bed Capacity 126 MAILineas SNF MART SNF MAILER SNF BED MAIL Capacity 126 MAIL Capacity 127 MARK SNF MARK SNF MAIL CAPACE SNF	_		·	
Tolephore Tolephore Ga Ga 227-5347 Alzheimer's Unit No	SPRINGFIELD	MO 65803-3633	Kegion 1	racinty Number 04907
Tolephore Tolephore Ga Ga 227-5347 Alzheimer's Unit No	MARI DE VILLA RETIREMENT CEN	TER, INC		
Mailing Address 13900 CLAYTON RD County SAINT LOUIS COUNTY DMH Licensed No TOWN AND COUNTRY MO 63017-8406 Region 7 Facility Number 05047 MARIAN CLIFF RESIDENTIAL CARE CENTER LLC 381 ELM ST Telephone (573) 543-2218 Alzheimer's Unit No SAINT MARY MO 63673-9330 Level of Care: RCF* Bed Capacity 66 Mailing Address PO BOX 272 County SAINTE GENEVIEVE DMH Licensed Yes FARMINGTON MO 63640-0272 Region 2 Facility Number 05058 MARIES MANOR 174 BALLPARK RD Telephone (573) 422-3177 Alzheimer's Unit No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE County Region 5		,	Telephone (636) 227-5347	Alzheimer's Unit No
MARIAN CLIFF RESIDENTIAL CARE CENTER LLC	TOWN AND COUNTRY	MO 63017-8406	Level of Care: SNF	Bed Capacity 224
MARIAN CLIFF RESIDENTIAL CARE CENTER LLC 381 ELM ST Telephone (573) 543-2218 Alzheimer's Unit No SAINT MARY MO 63673-9330 Level of Care: RCF* Bed Capacity 66 Mailing Address PO BOX 272 County SAINTE GENEVIEVE DMH Licensed Yes FARMINGTON MO 63640-0272 Region 2 Facility Number 05058 MARIES MANOR 174 BALLPARK RD Telephone (573) 422-3177 Alzheimer's Unit No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE County Region 5 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County Rapion 5	Mailing Address 13900 CLAYTON RD		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT MARY MO 63673-9330 Level of Care: RCF* Bed Capacity 66	TOWN AND COUNTRY	MO 63017-8406	Region 7	Facility Number 05047
SAINT MARY MO 63673-9330 Level of Care: RCF* Bed Capacity 66				
SAINT MARY MO 63673-9330 Level of Care: RCF* Bed Capacity 66	MARIAN CLIFF RESIDENTIAL CARI	E CENTER LLC		
Mailing Address PO BOX 272 County Region 2 SAINTE GENEVIEVE Recibity Number DMH Licensed O5058 MARIES MANOR Telephore (573) 422-3177 Alzheimer's Unit No No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Bailing Address 174 BALLPARK RD MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC Telephore (660) 263-6515 Alzheimer's Unit No No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 42 Mailing Address 901 UNION AVE Region 5 Facility Number 16369 MOBERLY MO 65270-2456 Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephore (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER BMH Licensed No	381 ELM ST		Telephone (573) 543-2218	Alzheimer's Unit No
MARIES MANOR Telephone (573) 422-3177 Alzheimer's Unit No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	SAINT MARY	MO 63673-9330	Level of Care: RCF*	Bed Capacity 66
MARIES MANOR 174 BALLPARK RD Telephone (573) 422-3177 Alzheimer's Unit No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County Region 5 Facility Number 16369 MARK TWAIN CARING CENTER 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	Mailing Address PO BOX 272		County SAINTE GENEVIEVE	DMH Licensed Yes
Telephone (573) 422-3177 Alzheimer's Unit No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Moberly MO 65270-2456 Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	FARMINGTON	MO 63640-0272	Region 2	Facility Number 05058
Telephone (573) 422-3177 Alzheimer's Unit No VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Moberly MO 65270-2456 Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	MARIES MANOR			
VIENNA MO 65582-8043 Level of Care: SNF Bed Capacity 98 Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes 90PLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No			Telephone (573) 422-3177	Alzheimer's Unit No
Mailing Address 174 BALLPARK RD County MARIES DMH Licensed No VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes 901 MAY ST Telephone SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	VIENNA	MO 65582-8043	Level of Care: SNF	Bed Capacity 98
VIENNA MO 65582-8043 Region 6 Medicare/Medicaid Facility Number 10491 MARK TWAIN ASSISTED LIVING, INC 901 UNION AVE Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County Region 5 Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes 901 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	Mailing Address 174 BALLPARK RD		County MARIES	DMH Licensed No
Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE County RayDOLPH DMH Licensed No MOBERLY MO 65270-2456 Region 5 Facility Number 16369 MARK TWAIN CARING CENTER 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No		MO 65582-8043	Region 6 Medicare/Medicaid	Facility Number 10491
Telephone (660) 263-6515 Alzheimer's Unit No MOBERLY MO 65270-2456 Level of Care: ALF** Bed Capacity 42 Mailing Address 901 UNION AVE MO 65270-2456 Region 5 Facility Number 16369 MARK TWAIN CARING CENTER 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No		, a		
MOBERLY MO 65270-2456 Level of Care: ALF** ALF** Bed Capacity 42 Mailing Address 901 UNION AVE MOBERLY MO 65270-2456 County RANDOLPH DMH Licensed No No MARK TWAIN CARING CENTER Facility Number 16369 MARK TWAIN CARING CENTER Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No		NC	m 1 1 (650) 252 5515	411 1 1 77 1
Mailing Address 901 UNION AVE MOBERLY MO 65270-2456 County Region 5 RANDOLPH DMH Licensed Facility Number No 16369 MARK TWAIN CARING CENTER 3001 MAY ST POPLAR BLUFF Mailing Address 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No			• '	
MOBERLY MO 65270-2456 Region 5 Facility Number 16369 MARK TWAIN CARING CENTER 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No		MO 052/0-2456		
MARK TWAIN CARING CENTER 3001 MAY ST Telephone (573) 686-6999 Alzheimer's Unit Yes POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No		110 (5505) 0.154	•	
3001 MAY STTelephone(573) 686-6999Alzheimer's UnitYesPOPLAR BLUFFMO 63901-1942Level of Care:SNFBed Capacity120Mailing Address 3001 MAY STCountyBUTLERDMH LicensedNo	MOBERLY	MO 65270-2456	Region 5	Facility Number 16369
POPLAR BLUFF MO 63901-1942 Level of Care: SNF Bed Capacity 120 Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	MARK TWAIN CARING CENTER			
Mailing Address 3001 MAY ST County BUTLER DMH Licensed No	3001 MAY ST		Telephone (573) 686-6999	Alzheimer's Unit Yes
•	POPLAR BLUFF	MO 63901-1942	Level of Care: SNF	Bed Capacity 120
POPLAR BLUFF MO 63901-1942 Region 2 Medicare/Medicaid Facility Number 16013	Mailing Address 3001 MAY ST		County BUTLER	DMH Licensed No
	POPLAR BLUFF	MO 63901-1942	Region 2 Medicare/Medicaid	Facility Number 16013

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MARK TWAIN MANOR			
11988 MARK TWAIN LN	Telephone (314) 291-8240	Alzheimer's Unit	No
BRIDGETON MO 63044-2825	Level of Care: SNF	Bed Capacity	120
Mailing Address 11988 MARK TWAIN LN	County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON MO 63044-2825	Region 7 Medicare/Medicaid	Facility Number	08188
MARSHFIELD CARE CENTER FOR REHAB AND HEALTHCARE			
800 SOUTH WHITE OAK	Telephone (417) 859-3701	Alzheimer's Unit	No
MARSHFIELD MO 65706-2231	Level of Care: SNF	Bed Capacity	74
Mailing Address 800 SOUTH WHITE OAK	County WEBSTER	DMH Licensed	No
MARSHFIELD MO 65706-2231	Region 1 Medicare/Medicaid	Facility Number	18481
MARSHFIELD PLACE, LLC	T. 1. 1 (417) 050 2462	A1 1	NT
820 SOUTH WHITE OAK ST	Telephone (417) 859-3462	Alzheimer's Unit	No
MARSHFIELD MO 65706-2231	Level of Care: RCF*	Bed Capacity DMH Licensed	40 V
Mailing Address 820 SOUTH WHITE OAK ST	County WEBSTER		Yes
MARSHFIELD MO 65706-2231	Region 1	Facility Number	20500
MARY CULVER HOME, THE			
221 WEST WASHINGTON AVE	Telephone (314) 966-6034	Alzheimer's Unit	No
KIRKWOOD MO 63122-3916	Level of Care: ICF	Bed Capacity	28
Mailing Address 221 W WASHINGTON AVE	County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD MO 63122-3916	Region 7	Facility Number	00592
MARY RYDER HOME			
4361 OLIVE ST	Telephone (314) 531-2981	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2621	Level of Care: RCF*	Bed Capacity	80
Mailing Address 4361 OLIVE ST	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63108-2621	Region 7	Facility Number	20972
MARY, QUEEN AND MOTHER CENTER			
7601 WATSON RD	Telephone (314) 961-8000	Alzheimer's Unit	NO
SHREWSBURY MO 63119-5001	Level of Care: SNF	Bed Capacity	230
Mailing Address 7601 WATSON RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SHREWSBURY MO 63119-5001	Region 7 Medicare/Medicaid	Facility Number	05103
MARYMOUNT MANOR			
313 AUGUSTINE RD	Telephone (636) 938-6770	Alzheimer's Unit	No
EUREKA MO 63025-1935	Level of Care: RCF*	Bed Capacity	100
Mailing Address PO BOX 600	County SAINT LOUIS COUNTY	DMH Licensed	Yes
EUREKA MO 63025-0600	Region 7	Facility Number	05117
MARYMOUNT MANOR			
313 AUGUSTINE RD	Telephone (636) 938-6770	Alzheimer's Unit	Yes
EUREKA MO 63025-1935	Level of Care: SNF	Bed Capacity	174
Mailing Address PO BOX 600	County SAINT LOUIS COUNTY	DMH Licensed	No
EUREKA MO 63025-0600	Region 7 Medicare/Medicaid	Facility Number	05117

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MARY'S RANCH, INC				
ROUTE 2, BOX 2790		Telephone (573) 238-4253	Alzheimer's Unit	No
MARBLE HILL	MO 63764-9510	Level of Care: RCF*	Bed Capacity	32
Mailing Address PO BOX 589	1410 03/04-9310	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-0589	•	Facility Number	08707
MARBLE HILL	WO 03/04-0389	Region 2	racinty Number	08/0/
MARYVILLE CHATEAU				
1101 E 5TH STREET		Telephone (660) 582-7447	Alzheimer's Unit	No
MARYVILLE	MO 64468-1955	Level of Care: RCF	Bed Capacity	20
Mailing Address 1101 E 5TH STREET		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-1955	Region 4	Facility Number	05149
MADVAILLE LIVING CENTED				
MARYVILLE LIVING CENTER 524 NORTH LAURA		Telephone (660) 582-7447	Alzheimer's Unit	Yes
MARYVILLE	MO 64468-1955	Level of Care: SNF	Bed Capacity	105
Mailing Address 524 NORTH LAURA	WIO 04408-1933	County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-1955		Facility Number	05149
MAKTVILLE	WO 04400-1933	Region 4 Medicare/Medicaid	racinty Number	03149
MASON POINTE CARE CENTER				
13190 SOUTH OUTER 40 RD		Telephone (314) 434-3300	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-5917	Level of Care: SNF	Bed Capacity	256
Mailing Address 13190 SOUTH OUTER	R 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-5917	Region 7 Medicare/Medicaid	Facility Number	03957
MASON POINTE CARE CENTER				
MASON POINTE CARE CENTER 13190 SOUTH OUTER 40 RD		Telephone (314) 434-3300	Alzheimer's Unit	No
	MO 63017-5917	Telephone (314) 434-3300 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	No 62
13190 SOUTH OUTER 40 RD		• '		
13190 SOUTH OUTER 40 RD CHESTERFIELD		Level of Care: ALF**	Bed Capacity	62
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER	R 40 RD	Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	62 No
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN	R 40 RD MO 63017-5917	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number	62 No 03957
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD	R 40 RD MO 63017-5917 G BY AMERICARE	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	62 No 03957 Yes
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS	R 40 RD MO 63017-5917	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	62 No 03957 Yes 120
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	62 No 03957 Yes 120 No
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS	R 40 RD MO 63017-5917 G BY AMERICARE	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	62 No 03957 Yes 120
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	62 No 03957 Yes 120 No
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	62 No 03957 Yes 120 No
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	62 No 03957 Yes 120 No 30805
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	62 No 03957 Yes 120 No 30805
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE Mailing Address 1041 WEST TRUMAN	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447 GRD	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	62 No 03957 Yes 120 No 30805
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	62 No 03957 Yes 120 No 30805
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE Mailing Address 1041 WEST TRUMAN	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447 R RD MO 64050-3447	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	62 No 03957 Yes 120 No 30805
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE Mailing Address 1041 WEST TRUMAN INDEPENDENCE	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447 R RD MO 64050-3447	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF* County JACKSON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	62 No 03957 Yes 120 No 30805
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE Mailing Address 1041 WEST TRUMAN INDEPENDENCE MAYWOOD TERRACE LIVING CEN 10300 EAST TRUMAN RD INDEPENDENCE	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447 IRD MO 64050-3447 ITER MO 64052-2258	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3 Telephone (816) 836-1250 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	62 No 03957 Yes 120 No 30805 No 24 Yes 03948
13190 SOUTH OUTER 40 RD CHESTERFIELD Mailing Address 13190 SOUTH OUTER CHESTERFIELD MATTIS POINTE - ASSISTED LIVIN 4962 MATTIS ROAD SAINT LOUIS Mailing Address 4962 MATTIS ROAD SAINT LOUIS MAYWOOD MANOR 1041 WEST TRUMAN RD INDEPENDENCE Mailing Address 1041 WEST TRUMAN INDEPENDENCE MAYWOOD TERRACE LIVING CEN 10300 EAST TRUMAN RD	R 40 RD MO 63017-5917 G BY AMERICARE MO 63128-2795 MO 63128-2795 MO 64050-3447 IRD MO 64050-3447 ITER MO 64052-2258	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 328-4084 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (816) 254-6789 Level of Care: RCF* County JACKSON Region 3	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	62 No 03957 Yes 120 No 30805 No 24 Yes 03948

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MCCLAY SENIOR CARE			
3801 MCCLAY ROAD		Telephone (636) 244-3323	Alzheimer's Unit No
SAINT PETERS	MO 63376-7327	Level of Care: SNF	Bed Capacity 60
Mailing Address 3801 MCCLAY ROA		County SAINT CHARLES	DMH Licensed No
SAINT PETERS	MO 63376-7327	Region 5 Medicare/Medicaid	Facility Number 29933
MCCRITE PLAZA AT BRIARCLIFI	F ASSISTED LIVING		
1201 NW TULLISON RD		Telephone (816) 888-7930	Alzheimer's Unit Yes
KANSAS CITY	MO 64116-2639	Level of Care: ALF**	Bed Capacity 164
Mailing Address 1201 NW TULLISON		County CLAY	DMH Licensed No
KANSAS CITY	MO 64116-2639	Region 4	Facility Number 29084
MCCRITE PLAZA AT BRIARCLIFI	F SKILLED FACILITY		
1301 TULLISON ROAD	SMULLD FACILITY	Telephone (816) 888-7930	Alzheimer's Unit No
KANSAS CITY	MO 64116-2640	Level of Care: SNF	Bed Capacity 56
Mailing Address 1201 NW TULLISON		County CLAY	DMH Licensed No
KANSAS CITY	MO 64116-2639	Region 4 Medicare	Facility Number 29084
MANUAL CITT	1410 04110 2037	Region + Medicare	27004
MCDONALD BOARDING HOME			
438 NORTH 17TH ST		Telephone (816) 233-7060	Alzheimer's Unit No
SAINT JOSEPH	MO 64501-2015	Level of Care: RCF	Bed Capacity 8
Mailing Address 438 NORTH 17TH S	Γ	County BUCHANAN	DMH Licensed Yes
SAINT JOSEPH	MO 64501-2015	Region 4	Facility Number 05170
MCDONALD COUNTY LIVING CE	NTER		
1000 PATTERSON ST		Telephone (417) 845-3351	Alzheimer's Unit Yes
ANDERSON	MO 64831-7327	Level of Care: SNF	Bed Capacity 96
Mailing Address 1000 PATTERSON S	T	County MCDONALD	DMH Licensed No
ANDERSON	MO 64831-7327	Region 1 Medicare/Medicaid	Facility Number 05183
MCUNICUT DI ACE ACCICTED I IN	UNIC AND MEMODY CADE		
MCKNIGHT PLACE ASSISTED LIV THREE MCKNIGHT PL	ING AND MEMORY CARE	Telephone (314) 997-5333	Alzheimer's Unit No
SAINT LOUIS	MO 63124-1900	Level of Care: ALF**	Bed Capacity 120
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 23542
STRICT EOORS	WO 03124 1700	region /	Tacinty Number 25542
MCKNIGHT PLACE ASSISTED LIV	VING AND MEMORY CARE		
THREE MCKNIGHT PLACE		Telephone (314) 993-3333	Alzheimer's Unit Yes
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	Bed Capacity 55
Mailing Address THREE MCKNIGHT	PLACE	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 23542
MOVAROUS BY A OR STORES - ~	ADE		
MCKNIGHT PLACE EXTENDED C	AKE	T-l (214) 002 2221	All-batter and Times
TWO MCKNIGHT PL	MO 63124 1000	Telephone (314) 993-2221	Alzheimer's Unit No
SAINT LOUIS Moiling Address TWO MCKNIGHT D	MO 63124-1900	Level of Care: SNF	Bed Capacity 70
Mailing Address TWO MCKNIGHT PL		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63124-1900	Region 7 Medicare	Facility Number 18914

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MCLARNEY MANOR				
215 EAST PRATT		Telephone (660) 258-7402	Alzheimer's Unit	No
BROOKFIELD	MO 64628-1300	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 129		County LINN	DMH Licensed	No
BROOKFIELD	MO 64628-0129	Region 5 Medicare/Medicaid	Facility Number	05220
MEADOW RIDGE SENIOR LIVING				
521 MEADOW RIDGE LN		Telephone (660) 263-0550	Alzheimer's Unit	No
MOBERLY	MO 65270-4550	Level of Care: ALF**	Bed Capacity	57
Mailing Address 521 MEADOW RIDGE		County RANDOLPH	DMH Licensed	No.
MOBERLY	MO 65270-4550	Region 5	Facility Number	
MODERLI	WIO 03270-4330	Region 5	racinty Number	28019
MEADOW VIEW HEALTH & REHAI	BILITATION	T. 1 (01.0) 200 250		
2203 EAST MECHANIC ST		Telephone (816) 380-2622	Alzheimer's Unit	Yes
HARRISONVILLE	MO 64701-2060	Level of Care: SNF	Bed Capacity	120
Mailing Address 2203 EAST MECHAN		County CASS	DMH Licensed	No
HARRISONVILLE	MO 64701-2060	Region 3 Medicare/Medicaid	Facility Number	00968
MEADOWBROOK RESIDENTIAL CA	ARE, INC			
806 WEST MULBERRY		Telephone (573) 546-7065	Alzheimer's Unit	No
PILOT KNOB	MO 63663-	Level of Care: ALF**	Bed Capacity	36
Mailing Address PO BOX 510		County IRON	DMH Licensed	No
PILOT KNOB	MO 63663-0510	Region 2	Facility Number	20513
MEADOWVIEW MEMORY CARE				
555 WOODLAND VILLAS LANE		Telephone (636) 296-1400	Alzheimer's Unit	Yes
ARNOLD	MO 63010-2011	Level of Care: ALF**	Bed Capacity	24
Mailing Address 555 WOODLAND VIL		County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-2011	Region 2	Facility Number	12549
MEDICALODGES BUTLER		T. 1 . (660) 670 2170		***
103 EAST NURSERY	MO (4700 0004	Telephone (660) 679-3179	Alzheimer's Unit	Yes
BUTLER	MO 64730-2331	Level of Care: SNF	Bed Capacity	110
Mailing Address 103 EAST NURSERY		County BATES	DMH Licensed	No
BUTLER	MO 64730-2331	Region 3 Medicare/Medicaid	Facility Number	05319
AFFRAA A OR GUG AVEGGVO				
MEDICALODGES NEOSHO		m 1 1 (415) 451 0544		***
400 LYON DR	150 54050 0404	Telephone (417) 451-2544	Alzheimer's Unit	Yes
NEOSHO	MO 64850-9194	Level of Care: SNF	Bed Capacity	114
Mailing Address 400 LYON DR		County NEWTON	DMH Licensed	No
NEOSHO	MO 64850-9194	Region 1 Medicare/Medicaid	Facility Number	05383
MEDICAL ODCEC NEWADA				
MEDICALODGES NEVADA		Tolophono (417) 667 5064	Alghaiman's Tinit	NI
1210 W ASHLAND ST	MO 64772 1006	Telephone (417) 667-5064	Alzheimer's Unit	No
NEVADA	MO 64772-1906	Level of Care: SNF	Bed Capacity	100
Mailing Address 1210 W ASHLAND ST	MO 64772 1006	County VERNON	DMH Licensed	No

Medicare/Medicaid

Facility Number

05717

MO 64772-1906

NEVADA

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MELODY HOUSE			
3031 SOUTH TEN MILE DR		Telephone (573) 893-7228	Alzheimer's Unit No
JEFFERSON CITY	MO 65109-6816	Level of Care: RCF*	Bed Capacity 15
Mailing Address 3031 S TEN MILE DR		County COLE	DMH Licensed Yes
JEFFERSON CITY	MO 65109-6816	Region 6	Facility Number 14376
MERAMEC NURSING CENTER			
940 MATTOX DR	1.0 .0000 00.1	Telephone (573) 468-7733	Alzheimer's Unit No
SULLIVAN	MO 63080-2364	Level of Care: SNF	Bed Capacity 60
Mailing Address 940 MATTOX DR	MO (2000 2264	County CRAWFORD	DMH Licensed No
SULLIVAN	MO 63080-2364	Region 6 Medicare/Medicaid	Facility Number 18277
MEXED CADE CENTED			
MEYER CARE CENTER 1201 WEST 19TH ST		Telephone (660) 584-4224	Alahaiman'a Unit
HIGGINSVILLE	MO 64027 1459	Telephone (660) 584-4224 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 56
	MO 64037-1458		Bed Capacity 56 DMH Licensed No
Mailing Address 1201 WEST 19TH ST HIGGINSVILLE	MO 64027 1459	•	
HIGGINSVILLE	MO 64037-1458	Region 3 Medicare/Medicaid	Facility Number 05326
MEYER CARE CENTER			
1201 WEST 19TH ST		Telephone (660) 584-4224	Alzheimer's Unit No
HIGGINSVILLE	MO 64037-1458	Level of Care: ALF**	Bed Capacity 39
Mailing Address 1201 WEST 19TH ST	1430	County LAFAYETTE	DMH Licensed No
HIGGINSVILLE	MO 64037-1458	Region 3	Facility Number 05326
THOUSEND VILLE	110 01037 1130	Region 5	Tacinty Number 03320
MILAN HEALTH CARE CENTER			
52435 INFIRMARY RD		Telephone (660) 265-4032	Alzheimer's Unit No
MILAN	MO 63556-2874	Level of Care: SNF	Bed Capacity 100
Mailing Address 52435 INFIRMARY R	AD.	County SULLIVAN	DMH Licensed No
MILAN	MO 63556-2874	Region 5 Medicare/Medicaid	Facility Number 05418
MILL CREEK VILLAGE-ASSISTED	LIVING BY AMERICARE	m	
1990 W SOUTHAMPTON DR	MO (5202 (220	Telephone (573) 381-2510	Alzheimer's Unit Yes
COLUMBIA 1000 W SOLUTIVA ME	MO 65203-6238	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1990 W SOUTHAMP		County BOONE	DMH Licensed No
COLUMBIA	MO 65203-6238	Region 6	Facility Number 30107
MILLER COUNTY CARE AND REH.	ABILITATION CENTER		
1157 HIGHWAY 17		Telephone (573) 369-2318	Alzheimer's Unit Yes
TUSCUMBIA	MO 65082-2100	Level of Care: SNF	Bed Capacity 86
Mailing Address 1157 HWY 17		County MILLER	DMH Licensed No
TUSCUMBIA	MO 65082-2100	Region 6 Medicare/Medicaid	Facility Number 05422
MILLER RESIDENT CARE, INC			
210 ROCK RD		Telephone (660) 327-5680	Alzheimer's Unit No
PARIS	MO 65275-1282	Level of Care: RCF*	Bed Capacity 40
Mailing Address 210 ROCK RD		County MONROE	DMH Licensed No
PARIS	MO 65275-1282	Region 5	Facility Number 18026

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MINGO RESIDENTIAL CARE FACI	ILITY		
24080 STATE HWY 51		Telephone (573) 222-3086	Alzheimer's Unit No
PUXICO	MO 63960-8114	Level of Care: RCF*	Bed Capacity 36
Mailing Address 24080 STATE HWY 5	51	County STODDARD	DMH Licensed Yes
PUXICO	MO 63960-8114	Region 2	Facility Number 24959
MOCKINGBIRD MANOR RESIDEN	TIAL CADE		
227 W FRANKLIN	HAL CARE	Telephone (816) 781-8058	Alzheimer's Unit No
LIBERTY	MO 64068-1641	Level of Care: RCF*	Bed Capacity 16
Mailing Address PO BOX 121	MIC 04000 1041	County CLAY	DMH Licensed Yes
LIBERTY	MO 64069-0121	Region 4	Facility Number 05450
LIBERTT	1410 04007 0121	Region -	racinty Number 03430
MONITEAU CARE CENTER		TEMPORARY CLO	
200 SOUTH GERHART		Telephone (573) 796-3822	Alzheimer's Unit No
CALIFORNIA	MO 65018-2433	Level of Care: SNF	Bed Capacity 60
Mailing Address 200 S GERHART		County MONITEAU	DMH Licensed No
CALIFORNIA	MO 65018-2433	Region 6 Medicare/Medicaid	Facility Number 20884
MONROE CITY MANOR CARE CE	NTER		
1010 HIGHWAY 24 & 36 EAST		Telephone (573) 735-4850	Alzheimer's Unit No
MONROE CITY	MO 63456-1116	Level of Care: SNF	Bed Capacity 60
Mailing Address 1010 HWY 24 & 36 E	EAST	County MARION	DMH Licensed No
MONROE CITY	MO 63456-1116	Region 5 Medicare/Medicaid	Facility Number 05473
MONROE MANOR			
200 SOUTH ST		Telephone (660) 327-4125	Alzheimer's Unit Yes
PARIS	MO 65275-1165	Level of Care: SNF	Bed Capacity 119
Mailing Address 200 SOUTH ST		County MONROE	DMH Licensed No
PARIS	MO 65275-1165	Region 5 Medicare/Medicaid	Facility Number 05484
MONTEREY PARK REHABILITAT	ION & HEALTH CARE CENTER	T. 1. 1. (01.6) 705 7000	
4600 LITTLE BLUE PARKWAY	MO 44077 0000	Telephone (816) 795-7888	Alzheimer's Unit No
INDEPENDENCE	MO 64057-8302	Level of Care: SNF	Bed Capacity 122
Mailing Address 4600 LITTLE BLUE I		County JACKSON	DMH Licensed No
INDEPENDENCE	MO 64057-8302	Region 3 Medicare/Medicaid	Facility Number 15987
MONTICELLO HOUCE			
MONTICELLO HOUSE		Tolonkono (572) 242 9090	Alaboimon's Tisia
1115 K LAND DR	MO (2755 2500	Telephone (573) 243-8989	Alzheimer's Unit No
JACKSON Molling Address DO DOV 740	MO 63755-2588	Level of Care: RCF*	Bed Capacity 32
Mailing Address PO BOX 740	MO (2755 0740	County CAPE GIRARDEAU	DMH Licensed No
JACKSON	MO 63755-0740	Region 2	Facility Number 14454
MONTICELLO HOUSE			
MONTICELLO HOUSE		Tolophono (572) 242 9090	Alghaiman's Unit
1115 K LAND DR JACKSON	MO 62755 2500	Telephone (573) 243-8989 Level of Care: SNF	Alzheimer's Unit Yes
	MO 63755-2588		Bed Capacity 105 DMH Licensed No
Mailing Address PO BOX 740 JACKSON	MO 63755 0740	•	
JACASON	MO 63755-0740	Region 2 Medicare/Medicaid	Facility Number 14454

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MOORE-FEW CARE CENTER				
901 SOUTH ADAMS		Telephone (417) 448-3841	Alzheimer's Unit	No
NEVADA	MO 64772-3209	Level of Care: SNF	Bed Capacity	108
Mailing Address 901 SOUTH ADAMS		County VERNON	DMH Licensed	No
NEVADA	MO 64772-3209	Region 1 Medicare/Medicaid	Facility Number	05703
MOOREVIEW RESIDENTIAL				
130 WEST CULTON		Telephone (660) 429-1587	Alzheimer's Unit	No
WARRENSBURG	MO 64093-1720	Level of Care: RCF	Bed Capacity	20
Mailing Address 130 WEST CULTON		County JOHNSON	DMH Licensed	Yes
WARRENSBURG	MO 64093-1720	Region 3	Facility Number	11225
		-		
MORNINGSIDE CENTER				
1700 MORNINGSIDE DR		Telephone (660) 646-0170	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-1545	Level of Care: SNF	Bed Capacity	60
Mailing Address 1700 MORNINGSIDI		County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-1545	Region 4 Medicare/Medicaid	Facility Number	05557
MORNINGSIDE CENTER ASSISTE	D LIVING APARTMENTS			
1702 MORNINGSIDE DR		Telephone (660) 646-0170	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-1545	Level of Care: ALF	Bed Capacity	31
Mailing Address 1702 MORNINGSIDI		County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-1545	Region 4	Facility Number	05557
MOTHER OF GOOD COUNSEL HO	ME			
6825 NATURAL BRIDGE RD		Telephone (314) 383-4765	Alzheimer's Unit	No
CAINTELOLIC				
SAINT LOUIS	MO 63121-5314	Level of Care: SNF	Bed Capacity	114
Mailing Address 6825 NATURAL BRI	DGE RD	County SAINT LOUIS COUNTY	DMH Licensed	114 No
Mailing Address 6825 NATURAL BRI SAINT LOUIS	DGE RD MO 63121-5314	County SAINT LOUIS COUNTY	DMH Licensed	No
Mailing Address 6825 NATURAL BRI SAINT LOUIS MOTHER OF PERPETUAL HELP F	DGE RD MO 63121-5314	County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number	No 05568
Mailing Address 6825 NATURAL BRI SAINT LOUIS	DGE RD MO 63121-5314	County SAINT LOUIS COUNTY	DMH Licensed Facility Number Alzheimer's Unit	No
Mailing Address 6825 NATURAL BRI SAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS	MO 63121-5314 RESIDENCE, INC MO 63119-5001	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF**	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 05568 Yes
Mailing Address 6825 NATURAL BRI SAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD	MO 63121-5314 RESIDENCE, INC MO 63119-5001	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260	DMH Licensed Facility Number Alzheimer's Unit	No 05568 Yes 160
Mailing Address 6825 NATURAL BRI SAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROA	MO 63121-5314 RESIDENCE, INC MO 63119-5001	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 05568 Yes 160 No
Mailing Address 6825 NATURAL BRI SAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROA	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 05568 Yes 160 No
Mailing Address 6825 NATURAL BRI SAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROA SAINT LOUIS	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 05568 Yes 160 No
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAD SAINT LOUIS MOUNT CARMEL SENIOR LIVING	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 05568 Yes 160 No 21111
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAS SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 05568 Yes 160 No 21111
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAS SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR SAINT CHARLES	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 05568 Yes 160 No 21111
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAS SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR SAINT CHARLES Mailing Address 723 FIRST CAPITOL SAINT CHARLES	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140 Level of Care: SNF County SAINT CHARLES	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 05568 Yes 160 No 21111 No 110
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAD SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR SAINT CHARLES Mailing Address 723 FIRST CAPITOL SAINT CHARLES MOUNTAIN VIEW HEALTHCARE	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 05568 Yes 160 No 21111 No 110 No 07560
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAD SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR SAINT CHARLES Mailing Address 723 FIRST CAPITOL SAINT CHARLES MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST	MO 63121-5314 RESIDENCE, INC MO 63119-5001 MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729 DR MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid Telephone (417) 934-6818	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 05568 Yes 160 No 21111 No 110 No 07560
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAD SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR SAINT CHARLES Mailing Address 723 FIRST CAPITOL SAINT CHARLES MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW	MO 63121-5314 RESIDENCE, INC MO 63119-5001 D MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid Telephone (417) 934-6818 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 05568 Yes 160 No 21111 No 07560
Mailing Address 6825 NATURAL BRISAINT LOUIS MOTHER OF PERPETUAL HELP F 7609 WATSON ROAD SAINT LOUIS Mailing Address 7609 WATSON ROAD SAINT LOUIS MOUNT CARMEL SENIOR LIVING 723 FIRST CAPITOL DR SAINT CHARLES Mailing Address 723 FIRST CAPITOL SAINT CHARLES MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST	MO 63121-5314 RESIDENCE, INC MO 63119-5001 MO 63119-5001 G - ST CHARLES, LLC MO 63301-2729 DR MO 63301-2729	County SAINT LOUIS COUNTY Region 7 Telephone (314) 918-2260 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (636) 946-4140 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid Telephone (417) 934-6818	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 05568 Yes 160 No 21111 No 110 No 07560

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MS B'S BLESSINGS				
4739 COTE BRILLIANTE AVE		Telephone (314) 533-1922	Alzheimer's Unit	No
SAINT LOUIS	MO 63113-1813	Level of Care: RCF	Bed Capacity	6
Mailing Address 4739 COTE BRILLIA	ANTE AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63113-1813	Region 7	Facility Number	10889
MT VERNON PLACE CARE CENTI	FR INC			
1425 SOUTH LANDRUM	EK, IIIC	Telephone (417) 466-2260	Alzheimer's Unit	No
MT VERNON	MO 65712-1912	Level of Care: SNF	Bed Capacity	60
Mailing Address 1425 S LANDRUM	WIO 03/12-1712	County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1912	Region 1 Medicare/Medicaid	Facility Number	16304
WII VERIVOIV	WIO 03/12-1/12	Region 1 Medicare/Medicaid	racinty Number	10304
MY PLACE RESIDENTIAL CARE,	L.C.			
23 NORTH SIXTH ST		Telephone (636) 933-1793	Alzheimer's Unit	No
FESTUS	MO 63028-1301	Level of Care: ALF	Bed Capacity	44
Mailing Address 23 NORTH SIXTH S	Т	County JEFFERSON	DMH Licensed	Yes
FESTUS	MO 63028-1301	Region 2	Facility Number	10631
MY PLACE TOO, INC				
1107 CLARKE ST		Telephone (636) 586-7871	Alzheimer's Unit	No
DE SOTO	MO 63020-2709	Level of Care: RCF*	Bed Capacity	50
Mailing Address 1107 CLARKE ST	WO 03020-270)	County JEFFERSON	DMH Licensed	Yes
DE SOTO	MO 63020-2709	Region 2	Facility Number	16234
DESOTO	110 03020 2707	Region 2	racinty Number	10234
MYERS NURSING & CONVALESC	FNT CENTER			
	ENT CENTER			
2315 WALROND AVE	ENTCENTER	Telephone (816) 231-3180	Alzheimer's Unit	No
2315 WALROND AVE KANSAS CITY	MO 64127-4210	Telephone (816) 231-3180 Level of Care: ICF	Alzheimer's Unit Bed Capacity	No 84
	MO 64127-4210	• '		
KANSAS CITY	MO 64127-4210	Level of Care: ICF	Bed Capacity	84
KANSAS CITY Mailing Address 2315 WALROND AV	MO 64127-4210 /E	Level of Care: ICF County JACKSON	Bed Capacity DMH Licensed	84 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY	MO 64127-4210 /E MO 64127-4210	Level of Care: ICF County JACKSON	Bed Capacity DMH Licensed	84 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR	MO 64127-4210 /E MO 64127-4210	Level of Care: ICF County JACKSON Region 3 Medicaid	Bed Capacity DMH Licensed Facility Number	84 No 05626
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE	MO 64127-4210 //E MO 64127-4210 E CENTER	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	84 No 05626 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA	MO 64127-4210 //E MO 64127-4210 E CENTER MO 64772-1025	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	84 No 05626 No 68
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	84 No 05626 No 68 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA	MO 64127-4210 //E MO 64127-4210 E CENTER MO 64772-1025	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	84 No 05626 No 68
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	84 No 05626 No 68 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	84 No 05626 No 68 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	84 No 05626 No 68 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 05626 No 68 No 18210
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN	MO 64127-4210 //E MO 64127-4210 E CENTER MO 64772-1025 ID AVE MO 64772-1025	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 05626 No 68 No 18210
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS	MO 64127-4210 //E MO 64127-4210 E CENTER MO 64772-1025 ID AVE MO 64772-1025	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	84 No 05626 No 68 No 18210
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 RD AVE MO 64772-1025 MO 63129-7600	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	84 No 05626 No 68 No 18210 Yes 114 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 RD AVE MO 64772-1025 MO 63129-7600	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	84 No 05626 No 68 No 18210 Yes 114 No
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NAZARETH LIVING CENTER	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 RD AVE MO 64772-1025 MO 63129-7600	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 05626 No 68 No 18210 Yes 114 No 17458
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600 MO 63129-7600	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 05626 No 68 No 18210 Yes 114 No 17458
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 RD AVE MO 64772-1025 MO 63129-7600	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7 Telephone (314) 487-3950 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 05626 No 68 No 18210 Yes 114 No 17458
KANSAS CITY Mailing Address 2315 WALROND AV KANSAS CITY NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE NEVADA Mailing Address 700 EAST HIGHLAN NEVADA NAZARETH LIVING CENTER 2 NAZARETH LN SAINT LOUIS Mailing Address 2 NAZARETH LN SAINT LOUIS NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER 2 NAZARETH LIVING CENTER	MO 64127-4210 /E MO 64127-4210 E CENTER MO 64772-1025 ID AVE MO 64772-1025 MO 63129-7600 MO 63129-7600	Level of Care: ICF County JACKSON Region 3 Medicaid Telephone (417) 667-8889 Level of Care: SNF County VERNON Region 1 Medicare/Medicaid Telephone (314) 487-3950 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 05626 No 68 No 18210 Yes 114 No 17458

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NEIGHBORHOODS AT QUAIL CRE	DEK THE		
1514 WEST LARK	EEK, THE	Telephone (417) 889-1275	Alzheimer's Unit Yes
SPRINGFIELD	MO 65810-2270	Level of Care: SNF	Bed Capacity 120
Mailing Address 1514 WEST LARK	WIO 03010-2270	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65810-2270		Facility Number 24701
SPRINGFIELD	WO 03810-2270	Region 1 Medicare/Medicaid	Facility Number 24/01
NEIGHBORHOODS REHABILITAT	TION & SKILLED NURSING BY TIGE	CRPLACE, THE	
3003 FALLING LEAF COURT	TOTAL SINDERD TOTAL TOTAL	Telephone (573) 256-4620	Alzheimer's Unit No
COLUMBIA	MO 65201-3549	Level of Care: SNF	Bed Capacity 120
Mailing Address 3003 FALLING LEAF		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-3549	Region 6 Medicare/Medicaid	Facility Number 24341
COLUMBIA	WO 03201-334)	Region o Medicare/Medicaid	Facility Number 24341
NEW HAVEN CARE CENTER			
9503 HIGHWAY 100		Telephone (573) 237-2103	Alzheimer's Unit No
NEW HAVEN	MO 63068-1300	Level of Care: SNF	Bed Capacity 90
Mailing Address 9503 HWY 100		County FRANKLIN	DMH Licensed No
NEW HAVEN	MO 63068-1300	Region 6 Medicare/Medicaid	Facility Number 05738
NEW HAVEN CARE CENTER			
9503 HIGHWAY 100		Telephone (573) 237-2103	Alzheimer's Unit No
NEW HAVEN	MO 63068-1300	Level of Care: ALF	Bed Capacity 16
Mailing Address 9503 HWY 100		County FRANKLIN	DMH Licensed No
NEW HAVEN	MO 63068-1300	Region 6	Facility Number 05738
NEW HAVEN LIVING CENTER			
609 GOLF ST		Telephone (816) 230-7530	Alzheimer's Unit No
ODESSA	MO 64076-1462	Level of Care: SNF	Bed Capacity 60
Mailing Address 609 GOLF ST		County LAFAYETTE	DMH Licensed No
ODESSA	MO 64076-1462	Region 3 Medicare/Medicaid	Facility Number 05749
NEW HOPE ASSISTED LIVING LLO	r		
328 NORTH NEW HOPE DRIVE		Telephone (573) 712-2992	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4819	Level of Care: ALF	Bed Capacity 15
Mailing Address 328 NORTH NEW HO		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4819	Region 2	Facility Number 32690
1 01 21 IN 32011	1110 00701 1017	Region 2	240mg ((amout
NEW HORIZONS RCF II			
5858 BUSIEK ROAD		Telephone (573) 756-2426	Alzheimer's Unit No
FARMINGTON	MO 63640-7325	Level of Care: ALF	Bed Capacity 15
Mailing Address PO BOX 510		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-0510	Region 2	Facility Number 14868
NEW MADRID LIVING CENTER		W 1 - 1 (572) 740 5422	A11 * 1. FT */
1050 DAWSON RD	MO (2000) 1110	Telephone (573) 748-5622	Alzheimer's Unit Yes
NEW MADRID	MO 63869-1116	Level of Care: SNF	Bed Capacity 112
Mailing Address 1050 DAWSON RD	MO (2000) 1110	County NEW MADRID	DMH Licensed No
NEW MADRID	MO 63869-1116	Region 2 Medicare/Medicaid	Facility Number 04952

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NEW MARK CARE CENTER			
11221 NORTH NASHUA DR		Telephone (816) 734-4433	Alzheimer's Unit Yes
KANSAS CITY	MO 64155-1159	Level of Care: SNF	Bed Capacity 199
Mailing Address 11221 N NASHUA I		County CLAY	DMH Licensed No
KANSAS CITY	MO 64155-1159	Region 4 Medicare/Medicaid	Facility Number 12688
M I (O) IS OH I		Region - Medicare/Medicard	ruemey rumber 12000
NEWSTEAD PLACE			
19 NORTH NEWSTEAD		Telephone (314) 286-4510	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2260	Level of Care: RCF*	Bed Capacity 20
Mailing Address 19 N NEWSTEAD		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63108-2260	Region 7	Facility Number 19169
NHC HEALTHCARE, DESLOGE			
801 BRIM ST		Telephone (573) 431-0223	Alzheimer's Unit Yes
DESLOGE	MO 63601-3441	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX AA		County SAINT FRANCOIS	DMH Licensed No
DESLOGE	MO 63601-0568	Region 2 Medicare/Medicaid	Facility Number 02143
		Treateur (/Treateuru	02110
NHC HEALTHCARE, JOPLIN			
2700 EAST 34TH ST		Telephone (417) 781-1737	Alzheimer's Unit No
JOPLIN	MO 64804-4310	Level of Care: SNF	Bed Capacity 126
Mailing Address 2700 EAST 34TH ST		County NEWTON	DMH Licensed No
JOPLIN	MO 64803-2877	Region 1 Medicare/Medicaid	Facility Number 04044
NHC HEALTHCARE, KENNETT			
1120 FALCON		Telephone (573) 888-1150	Alzheimer's Unit Yes
KENNETT	MO 63857-3825	Level of Care: SNF	Bed Capacity 170
Mailing Address PO BOX 696	WO 03037-3023	County DUNKLIN	DMH Licensed No
KENNETT	MO 63857-0696	Region 2 Medicare/Medicaid	Facility Number 04268
KENNETT	WO 03037-0090	kegion 2 Medicare/Medicaid	racinty Number 04208
NHC HEALTHCARE, MARYLAND	HEIGHTS		
2920 FEE FEE RD		Telephone (314) 291-0121	Alzheimer's Unit Yes
MARYLAND HEIGHTS	MO 63043-1915	Level of Care: SNF	Bed Capacity 220
Mailing Address 2920 FEE FEE RD		County SAINT LOUIS COUNTY	DMH Licensed No
MARYLAND HEIGHTS	MO 63043-1915	Region 7 Medicare/Medicaid	Facility Number 08272
NHC HEALTHCARE, ST CHARLES	.		
35 SUGAR MAPLE LN	•	Telephone (636) 946-8887	Alzheimer's Unit No
SAINT CHARLES	MO 63303-5740	Level of Care: SNF	Bed Capacity 120
Mailing Address 35 SUGAR MAPLE I		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63303-5740	Region 5 Medicare/Medicaid	Facility Number 07503
STANT CHARLES	03303 3740	Welon 2 Menical Chalenicald	Tuelling Tulling 0/303
NHC HEALTHCARE, WEST PLAIN	S		
211 DAVIS DR		Telephone (417) 256-0798	Alzheimer's Unit Yes
211 DAVIS DR WEST PLAINS	MO 65775-2242	Telephone (417) 256-0798 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 114
		•	

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NICK'S HEALTH CARE CENTER, I	LC		
253 EAST HIGHWAY 116		Telephone (816) 539-2376	Alzheimer's Unit No
PLATTSBURG	MO 64477-1561	Level of Care: SNF	Bed Capacity 70
Mailing Address 253 EAST HWY 116		County CLINTON	DMH Licensed No
PLATTSBURG	MO 64477-1561	Region 4 Medicare/Medicaid	Facility Number 22058
NIXA NURSING & REHAB			
1104 NORTH MAIN ST		Telephone (417) 725-1777	Alzheimer's Unit No
NIXA	MO 65714-9316	Level of Care: SNF	Bed Capacity 82
Mailing Address 1104 N MAIN ST	140 037117310	County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9316	Region 1 Medicare/Medicaid	Facility Number 13840
NODAWAY NURSING HOME			
22371 STATE HIGHWAY 46		Telephone (660) 562-2876	Alzheimer's Unit No
MARYVILLE	MO 64468-8157	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 307	110 01.100 0107	County NODAWAY	DMH Licensed No
MARYVILLE	MO 64468-0307	Region 4 Medicare/Medicaid	Facility Number 05766
			•
NORMANDY NURSING CENTER			
7301 SAINT CHARLES ROCK RD		Telephone (314) 862-0555	Alzheimer's Unit No
SAINT LOUIS	MO 63133-1737	Level of Care: SNF	Bed Capacity 116
Mailing Address 7301 SAINT CHARLI		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63133-1737	Region 7 Medicare/Medicaid	Facility Number 01118
NORTERRE			
2555 NORTERRE CIRCLE		Telephone (816) 479-4793	Alzheimer's Unit No
LIBERTY	MO 64068-3313	Level of Care: SNF	Bed Capacity 60
Mailing Address 2555 NORTERRE CI	RCLE	County CLAY	DMH Licensed No
LIBERTY	MO 64086-3313	Region 4 Medicare/Medicaid	Facility Number 31005
NORTERRE			
2580 NORTERRE CIRCLE		Telephone (816) 479-4793	Alzheimer's Unit Yes
LIBERTY	MO 64068-3412	Level of Care: ALF**	Bed Capacity 60
Mailing Address 2580 NORTERRE CII	RCLE	County CLAY	DMH Licensed No
LIBERTY	MO 64068-3412	Region 4	Facility Number 31005
NODELL VIII V 1 CE DA SA			
NORTH VILLAGE PARK		m 1 1 (660) 260 7200	
2041 SILVA LN	140 (5270 2670	Telephone (660) 269-7300	Alzheimer's Unit No
MOBERLY	MO 65270-3658	Level of Care: SNF	Bed Capacity 184
Mailing Address 2041 SILVA LN	MO (5270 2650	County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-3658	Region 5 Medicare/Medicaid	Facility Number 06481
NORTHLAND REHABILITATION 8	k HEALTH CARE CENTER		
4301 NE PARVIN ROAD		Telephone (816) 702-8000	Alzheimer's Unit No
KANSAS CITY	MO 64117-3001	Level of Care: SNF	Bed Capacity 118
Mailing Address 4301 NE PARVIN RC		County CLAY	DMH Licensed No
KANSAS CITY	MO 64117-3001	Region 4 Medicare/Medicaid	Facility Number 31230

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NORTHPARK VILLAGE - ASSISTE	D LIVING BY AMERICARE		
4449 N STATE HIGHWAY NN		Telephone (417) 581-3200	Alzheimer's Unit No
OZARK	MO 65721-7221	Level of Care: ALF**	Bed Capacity 52
Mailing Address 4449 N STATE HIGH	HWAY NN	County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-7221	Region 1	Facility Number 20003
NORTHRIDGE PLACE - ASSISTED	LIVING BY AMERICARE		
1500 LYNN ST		Telephone (417) 532-9793	Alzheimer's Unit Yes
LEBANON	MO 65536-4409	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1500 LYNN ST		County LACLEDE	DMH Licensed No
LEBANON	MO 65536-4409	Region 1	Facility Number 20525
			20020
NORTHVIEW VILLAGE		T. I	
2415 NORTH KINGSHIGHWAY		Telephone (314) 361-1300	Alzheimer's Unit No
SAINT LOUIS	MO 63113-1109	Level of Care: SNF	Bed Capacity 320
Mailing Address 2415 NORTH KINGS		County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63113-1109	Region 7 Medicare/Medicaid	Facility Number 08058
NORTHWOOD HILLS CARE CENT	TER		
800 NORTH ARTHUR ST		Telephone (417) 754-2208	Alzheimer's Unit Yes
HUMANSVILLE	MO 65674-8655	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 187		County POLK	DMH Licensed No
HUMANSVILLE	MO 65674-0187	Region 1 Medicare/Medicaid	Facility Number 10607
OAK KNOLL SKILLED NURSING	& REHABILITATION CENTER		
37 N CLARK AVE		Telephone (314) 521-7419	Alzheimer's Unit No
FERGUSON	MO 63135-2323	Level of Care: SNF	Bed Capacity 72
Mailing Address 37 N CLARK AVE		County SAINT LOUIS COUNTY	DMH Licensed No
FERGUSON	MO 63135-2323	Region 7 Medicare/Medicaid	Facility Number 05864
OAK DADK CADE CENTED			
OAK PARK CARE CENTER		T-l (214) 791 2444	A lask adam and a Visade Ni
6637 BERTHOLD AVE	MO (2120 2219	Telephone (314) 781-3444 Level of Care: SNF	Alzheimer's Unit No
SAINT LOUIS Mailing Address 6627 REPTHOLD AV	MO 63139-3318		Bed Capacity 120
Mailing Address 6637 BERTHOLD A' SAINT LOUIS	MO 63139-3318	•	DMH Licensed No Facility Number 05914
SAINI LOUIS	WIO 03139-3316	Region 7 Medicare/Medicaid	Facility Number 03914
OAK POINTE OF CARTHAGE			
300 W AIRPORT DR		Telephone (417) 358-3355	Alzheimer's Unit Yes
CARTHAGE	MO 64836-3511	Level of Care: ALF**	Bed Capacity 55
Mailing Address 300 W AIRPORT DR		County JASPER	DMH Licensed No
CARTHAGE	MO 64836-3511	Region 1	Facility Number 30168
OAK POINTE OF KEARNEY			
200 MEADOWBROOK DR		Telephone (816) 628-0075	Alzheimer's Unit Yes
KEARNEY	MO 64060-8788	Level of Care: ALF**	Bed Capacity 55
Mailing Address 200 MEADOWBROO	OK DR	County CLAY	DMH Licensed No
KEARNEY	MO 64060-8788	Region 4	Facility Number 29803

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OAK POINTE OF MARYVILLE			
817 SOUTH COUNTRY CLUB DR		Telephone (660) 562-2799	Alzheimer's Unit Yes
MARYVILLE	MO 64468-1477	Level of Care: ALF**	Bed Capacity 55
Mailing Address 817 SOUTH COUNTR		County NODAWAY	DMH Licensed No
MARYVILLE	MO 64468-1477	Region 4	Facility Number 29544
OAK POINTE OF MONETT			
1011 OLD AIRPORT ROAD		Telephone (417) 235-3500	Alzheimer's Unit Yes
MONETT	MO 65708-1375	Level of Care: ALF**	Bed Capacity 55
Mailing Address 1011 OLD AIRPORT I		County LAWRENCE	DMH Licensed No
MONETT	MO 65708-1375	Region 1	Facility Number 30206
OAK POINTE OF NEOSHO			
2601 OAK RIDGE EXTENSION		Telephone (417) 451-8872	Alzheimer's Unit Yes
NEOSHO	MO 64850-7765	Level of Care: ALF**	Bed Capacity 55
Mailing Address 2601 OAK RIDGE EX		County NEWTON	DMH Licensed No
NEOSHO	MO 64850-7765	Region 1	Facility Number 29972
NEOSHO	WIO 04630-7703	Region 1	racincy Number 29972
OAK POINTE OF ROLLA			
1000 EAST LIONS CLUB DRIVE		Telephone (573) 426-2186	Alzheimer's Unit Yes
ROLLA	MO 65401-4356	Level of Care: ALF**	Bed Capacity 65
Mailing Address 1000 EAST LIONS CL	UB DRIVE	County PHELPS	DMH Licensed No
ROLLA	MO 65401-4356	Region 6	Facility Number 31216
OAK POINTE OF WARRENTON			
700 FORREST AVE		Telephone (636) 456-6464	Alzheimer's Unit Yes
WARRENTON	MO 63383-7040	Level of Care: ALF**	Bed Capacity 71
Mailing Address 700 FORREST AVE		County WARREN	DMH Licensed No
WARRENTON	MO 63383-7040	Region 6	Facility Number 25045
OAK POINTE OF WASHINGTON 1650 HIGH STREET		Telephone (636) 390-3290	Alzheimer's Unit Yes
WASHINGTON	MO 63090-4354	Level of Care: ALF**	Bed Capacity 65
Mailing Address 1650 HIGH STREET	1410 03090-4334	County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-4354	Region 6	Facility Number 32114
WASHINGTON	WIO 03070-4334	Region 0	Facinity Number 32114
OAK RIDGE ASSISTED LIVING			
403 CRISPIN ST		Telephone (816) 776-3435	Alzheimer's Unit Yes
RICHMOND	MO 64085-1212	Level of Care: ALF**	Bed Capacity 55
Mailing Address 403 CRISPIN ST		County RAY	DMH Licensed No
RICHMOND	MO 64085-1212	Region 4	Facility Number 29711
OLVELLE GLEE STUTTE			
OAKDALE CARE CENTER 2702 DEBBIE LN		Tolophone (572) 696 5242	Alzheimen's Unit
POPLAR BLUFF	MO 63901 2650	Telephone (573) 686-5242 Level of Care: ALF	Alzheimer's Unit No Bed Capacity 60
	MO 63901-2650		Bed Capacity 60 DMH Licensed No
Mailing Address 2702 DEBBIE LN	MO 63001 2650	•	
POPLAR BLUFF	MO 63901-2650	Region 2	Facility Number 18157

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OAKDALE CARE CENTER			
2702 DEBBIE LN		Telephone (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care: SNF	Bed Capacity 70
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-2650	Region 2 Medicare/Medicaid	Facility Number 18157
OAKDALE CARE CENTER			
2702 DEBBIE LN		Telephone (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care: RCF*	Bed Capacity 36
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-2650	Region 2	Facility Number 18157
			•
OAKRIDGE OF PLATTSBURG			
205 EAST CLAY AVE		Telephone (816) 539-2128	Alzheimer's Unit No
PLATTSBURG	MO 64477-8100	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 247		County CLINTON	DMH Licensed No
PLATTSBURG	MO 64477-0247	Region 4 Medicare/Medicaid	Facility Number 05994
		11001001 0/1120110010	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
OAKS COTTAGE ASSISTED LIVIN	G. THE		
5448 N 2ND AVENUE	G, THE	Telephone (417) 581-0330	Alzheimer's Unit Yes
OZARK	MO 65721-6210	Level of Care: ALF**	Bed Capacity 12
Mailing Address 5448 N 2ND AVENU		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-6210	Region 1	Facility Number 31804
<u> </u>		Region	Tuellity Humber 51004
OAKS, THE			
5550 NOLAND ROAD		Telephone (816) 356-0200	Alzheimer's Unit No
KANSAS CITY	MO 64133-3685	Level of Care: RCF	Bed Capacity 62
Mailing Address 5550 NOLAND RD		County JACKSON	DMH Licensed Yes
KANSAS CITY	MO 64133-3685	Region 3	Facility Number 13440
		and the second s	10110
OAKWOOD ESTATES NURSING &	REHAR		
5303 BERMUDA DR	KEILID	Telephone (314) 385-0910	Alzheimer's Unit Yes
NORMANDY	MO 63121-1407	Level of Care: SNF	Bed Capacity 115
Mailing Address 5303 BERMUDA DR		County SAINT LOUIS COUNTY	DMH Licensed No
NORMANDY	MO 63121-1407	Region 7 Medicare/Medicaid	Facility Number 01238
		11001011 (/112011011	
OASIS RESIDENTIAL CARE FACII	LITY		
3508 PRAIRIE AVE	J	Telephone (314) 534-3355	Alzheimer's Unit No
SAINT LOUIS	MO 63107-2214	Level of Care: RCF*	Bed Capacity 20
Mailing Address 3508 PRAIRIE AVE	110 00107 2217	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63107-2214	Region 7	Facility Number 15415
DAINI LOUIS	1410 03107-2214	Regiuii /	Facility Number 15415
OREGON CARE CENTER			
501 MONROE		Telephone (660) 446-3355	Alzheimer's Unit No
OREGON	MO 64473-7800	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 19		County HOLT	DMH Licensed No
OREGON	MO 64473-0019	Region 4 Medicare/Medicaid	Facility Number 06097
	0 001/	region - medical contental	000)/

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ORILLA'S WAY		m		
1209 SOUTH HIGH ST		Telephone (660) 564-2204	Alzheimer's Unit	No
GRANT CITY	MO 64456-0056	Level of Care: ALF**	Bed Capacity	37
Mailing Address PO BOX 56	MO (4456 0056	County WORTH	DMH Licensed	No
GRANT CITY	MO 64456-0056	Region 4	Facility Number	08591
OSAGE BEACH REHABILITATION	JAND HEATTH CARE CENTER			
844 PASSOVER RD	VAID HEALTH CARE CENTER	Telephone (573) 348-2225	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-2834	Level of Care: SNF	Bed Capacity	94
Mailing Address 844 PASSOVER RD	110 03003 2031	County CAMDEN	DMH Licensed	No
OSAGE BEACH	MO 65065-2834	Region 6 Medicare/Medicaid	Facility Number	06116
OUR LADY OF MERCY COUNTRY 2160 MERCY DR	HOME	Telephone (816) 781-5711	Alzheimer's Unit	No
LIBERTY	MO 64068-7955	Level of Care: RCF*	Bed Capacity	44
Mailing Address 2160 MERCY DR	WIO 04008-7933	County CLAY	DMH Licensed	No
LIBERTY	MO 64068-7955	Region 4	Facility Number	06153
LIDERTT	WO 04000-7733	Region 4	racinty Number	00133
OWEN ACRES RESIDENTIAL CAR	E FACILITY			
614 COUNTY ROAD 466		Telephone (573) 778-0497	Alzheimer's Unit	No
POPLAR BLUFF	MO 63901-2964	Level of Care: RCF	Bed Capacity	20
Mailing Address 614 COUNTY RD 46	66	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF	MO 63901-2964	Region 2	Facility Number	21093
OXFORD GRAND AT SHOAL CREE	EK			
8280 N TULLIS AVENUE		Telephone (816) 781-8282	Alzheimer's Unit	Yes
KANSAS CITY	MO 64158-7683	Level of Care: ALF**	Bed Capacity	98
Mailing Address 8280 N TULLIS AVE	ENUE	County CLAY	DMH Licensed	No
KANSAS CITY	MO 64158-7683	Region 4	Facility Number	30758
OZARK MANOR				
1013 HIGHWAY Z		Telephone (573) 783-8338	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-8035	Level of Care: ALF**	Bed Capacity	55
Mailing Address 1013 HIGHWAY Z		County MADISON	DMH Licensed	No
FREDERICKTOWN	MO 63645-8035	Region 2	Facility Number	22947
			•	
OZARK NURSING & CARE CENTE	CR			
1486 NORTH RIVERSIDE RD		Telephone (417) 581-7126	Alzheimer's Unit	No
OZARK	MO 65721-7688	Level of Care: SNF	Bed Capacity	120
Mailing Address 1486 NORTH RIVER	SIDE RD	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-7688	Region 1 Medicare/Medicaid	Facility Number	06240
OZARK OAKS RESIDENTIAL CAR	E FACILITY II			
3405 S SCHIFFERDECKER		Telephone (417) 347-7760	Alzheimer's Unit	No
JOPLIN	MO 64804-1388	Level of Care: RCF*	Bed Capacity	30
Mailing Address PO BOX 2526		County NEWTON	DMH Licensed	Yes
JOPLIN	MO 64803-2526	Region 1	Facility Number	13636
		8		-2000

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OZARK REHABILITATION & HEA	LTH CARE CENTER		
1083 OZARK CARE DR		Telephone (573) 348-1711	Alzheimer's Unit No
OSAGE BEACH	MO 65065-3016	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 270		County CAMDEN	DMH Licensed No
OSAGE BEACH	MO 65065-0270	Region 6 Medicare/Medicaid	Facility Number 06217
OZARK RIVERVIEW MANOR			
1200 WEST HALL ST		Telephone (417) 581-6025	Alzheimer's Unit No
OZARK	MO 65721-9103	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 157		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-0157	Region 1 Medicare/Medicaid	Facility Number 01426
OZARKS METHODIST MANOR, TH	IF.		
205 SOUTH COLLEGE	•••	Telephone (417) 258-2573	Alzheimer's Unit Yes
MARIONVILLE	MO 65705-9340	Level of Care: SNF	Bed Capacity 78
Mailing Address PO BOX 403	1410 03703 7340	County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1 Medicare/Medicaid	Facility Number 06273
WE INTO IN VIELE	110 03703 0403	Region 1 Wedicare/Medicard	racinty (value)
OZARKS METHODIST MANOR, TH	IE		
205 SOUTH COLLEGE		Telephone (417) 258-2573	Alzheimer's Unit No
MARIONVILLE	MO 65705-9340	Level of Care: RCF	Bed Capacity 76
Mailing Address PO BOX 403		County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1	Facility Number 06273
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		Telephone (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: SNF	Bed Capacity 120
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6 Medicare/Medicaid	Facility Number 12638
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		Telephone (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: ALF**	Bed Capacity 16
Mailing Address 105 S SIXTH ST	1.10 03007 1320	County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6	Facility Number 12638
DADO DDOVENOE			
PARC PROVENCE		T-1 (214) 542 2500	Aleksins and Timbe
605 COEUR DE VILLE DR	MO (2141 (602	Telephone (314) 542-2500	Alzheimer's Unit Yes
SAINT LOUIS	MO 63141-6603	Level of Care: SNF	Bed Capacity 140
Mailing Address 605 COEUR DE VILL		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63141-6603	Region 7	Facility Number 24122
PARK PLACE APARTMENTS			
1211 NORTH ASH ST		Telephone (417) 934-6818	Alzheimer's Unit No
MOUNTAIN VIEW	MO 65548-7376	Level of Care: ALF	Bed Capacity 18
Mailing Address PO BOX 879		County HOWELL	DMH Licensed No
MOUNTAIN VIEW	MO 65548-0879	Region 1	Facility Number 15542

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PARK PLACE II				
2000 BOARDWALK PLACE DR		Telephone (636) 695-4360	Alzheimer's Unit	No
O'FALLON	MO 63368-3901	Level of Care: ALF**	Bed Capacity	124
Mailing Address 2000 BOARDWALK P.	LACE DR	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63368-3901	Region 5	Facility Number	29016
DADWDALE MANOR GARE GENTEER				
PARKDALE MANOR CARE CENTER	•	T. I. I. (CCO) 592 91C1	A1 1 * 1 TI	NI-
814 WEST SOUTH AVE	MO (4469 2772	Telephone (660) 582-8161	Alzheimer's Unit	No
	MO 64468-2772	Level of Care: SNF	Bed Capacity	86 N
Mailing Address 814 W SOUTH AVE	MO (4469 2772	County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2772	Region 4 Medicare/Medicaid	Facility Number	06308
PARKLANE CARE AND REHABILIT	ATION CENTER			
401 MAR-LE DR		Telephone (636) 332-9580	Alzheimer's Unit	Yes
WENTZVILLE	MO 63385-1647	Level of Care: SNF	Bed Capacity	240
Mailing Address 401 MAR-LE DR		County SAINT CHARLES	DMH Licensed	No
· ·	MO 63385-1647	Region 5 Medicare/Medicaid	Facility Number	04883
			·	
PARKSIDE MANOR				
1201 HUNT AVE		Telephone (573) 449-1448	Alzheimer's Unit	Yes
	MO 65202-1367	Level of Care: SNF	Bed Capacity	120
Mailing Address 1201 HUNT AVE		County BOONE	DMH Licensed	No
COLUMBIA	MO 65202-1367	Region 6 Medicare/Medicaid	Facility Number	11262
PARKSIDE MANOR, LLC				
300 S SAINT CHARLES ST		Telephone (573) 324-9918	Alzheimer's Unit	NO
	MO 63334-2221	Level of Care: ALF**	Bed Capacity	44
Mailing Address 300 S SAINT CHARLE		County PIKE	DMH Licensed	No
	MO 63334-2221	Region 5	Facility Number	05511
			·	
PARKSIDE-ASSISTED LIVING BY A	MERICARE			
2100 PARKSIDE AVE		Telephone (573) 308-0834	Alzheimer's Unit	NO
ROLLA	MO 65401-5472	Level of Care: ALF**	Bed Capacity	28
Mailing Address 2100 PARKSIDE AVE		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-5472	Region 6	Facility Number	31191
PARKVIEW HEALTH CARE FACILI	TY			
119 WEST FOREST		Telephone (417) 326-3000	Alzheimer's Unit	Yes
	MO 65613-1316	Level of Care: SNF	Bed Capacity	78
Mailing Address 119 WEST FOREST	· · ·	County POLK	DMH Licensed	No
	MO 65613-1316	Region 1 Medicare/Medicaid	Facility Number	17638
PARKVIEW HEALTHCARE				
128 NORTH HARDESTY		Telephone (816) 241-2020	Alzheimer's Unit	No
	MO 64123-1404	Level of Care: SNF	Bed Capacity	120
Mailing Address 128 NORTH HARDES	TY	County JACKSON	DMH Licensed	No

Medicare/Medicaid

Facility Number

02928

MO 64123-1404

KANSAS CITY

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PARKWAY HEALTH CARE CENTI	ER			
2323 SWOPE PARKWAY		Telephone (816) 924-1122	Alzheimer's Unit	No
KANSAS CITY	MO 64130-2638	Level of Care: SNF	Bed Capacity	97
Mailing Address 2323 SWOPE PARK		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64130-2638	Region 3 Medicare/Medicaid	Facility Number	07092
PARKINA W GENTOR I WING TWO				
PARKWAY SENIOR LIVING, THE		The second secon		37
550 NE NAPOLEON DR	MO (4014 5402	Telephone (816) 228-8866	Alzheimer's Unit	Yes
BLUE SPRINGS	MO 64014-5403	Level of Care: ALF**	Bed Capacity	72
Mailing Address 550 NE NAPOLEON		County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-5403	Region 3	Facility Number	29917
PARKWOOD MANOR				
325 NORTH SPRIGG ST		Telephone (573) 334-7011	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-5531	Level of Care: RCF*	Bed Capacity	20
Mailing Address 325 N SPRIGG ST		County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-5531	Region 2	Facility Number	06291
		region -		002)1
PARKWOOD MANOR				
325 NORTH SPRIGG ST		Telephone (573) 334-7011	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-5531	Level of Care: RCF	Bed Capacity	10
Mailing Address 325 NORTH SPRIGO	G ST	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-5531	Region 2	Facility Number	06291
PARKWOOD MEADOWS - ASSIST	ED LIVING BY AMERICARE			
805 PARKWOOD DR		Telephone (573) 883-3883	Alzheimer's Unit	Yes
805 PARKWOOD DR SAINTE GENEVIEVE	MO 63670-1858	Level of Care: ALF**	Bed Capacity	66
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DI	MO 63670-1858 R	Level of Care: ALF** County SAINTE GENEVIEVE	Bed Capacity DMH Licensed	66 No
805 PARKWOOD DR SAINTE GENEVIEVE	MO 63670-1858	Level of Care: ALF**	Bed Capacity	66
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DI SAINTE GENEVIEVE	MO 63670-1858 R MO 63670-1858	Level of Care: ALF** County SAINTE GENEVIEVE	Bed Capacity DMH Licensed	66 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DI	MO 63670-1858 R MO 63670-1858	Level of Care: ALF** County SAINTE GENEVIEVE Region 2	Bed Capacity DMH Licensed	66 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DI SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A	MO 63670-1858 R MO 63670-1858	Level of Care: ALF** County SAINTE GENEVIEVE	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	66 No 23234
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DI SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS	MO 63670-1858 R MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	66 No 23234 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DI SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN	MO 63670-1858 R MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	66 No 23234 No 130
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD I	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	66 No 23234 No 130 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD I	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 23234 No 130 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD L MARYLAND HEIGHTS	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 23234 No 130 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD E MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 23234 No 130 No 02471
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD L MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST	MO 63670-1858 R MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit	66 No 23234 No 130 No 02471
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD E MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST NEVADA	MO 63670-1858 R MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit Bed Capacity	No 23234 No 130 No 02471 Yes 40
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD LE MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST NEVADA Mailing Address 2101 N ASH ST NEVADA	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER MO 64772-1082	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999 Level of Care: SNF County VERNON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed	66 No 23234 No 130 No 02471 Yes 40 No
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD LE MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST NEVADA Mailing Address 2101 N ASH ST NEVADA PEACE HAVEN ASSOCIATION	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER MO 64772-1082	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999 Level of Care: SNF County VERNON Region 1 Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 23234 No 130 No 02471 Yes 40 No 16917
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD LE MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST NEVADA Mailing Address 2101 N ASH ST NEVADA PEACE HAVEN ASSOCIATION 12630 ROTT RD	MO 63670-1858 R MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER MO 64772-1082 MO 64772-1082	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999 Level of Care: SNF County VERNON Region 1 Medicaid Telephone (314) 965-3833	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 23234 No 130 No 02471 Yes 40 No 16917
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD E MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST NEVADA Mailing Address 2101 N ASH ST NEVADA PEACE HAVEN ASSOCIATION 12630 ROTT RD SAINT LOUIS	MO 63670-1858 MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER MO 64772-1082	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999 Level of Care: SNF County VERNON Region 1 Medicaid Telephone (314) 965-3833 Level of Care: ICF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 23234 No 130 No 02471 Yes 40 No 16917
805 PARKWOOD DR SAINTE GENEVIEVE Mailing Address 805 PARKWOOD DE SAINTE GENEVIEVE PARKWOOD SKILLED NURSING A 3201 PARKWOOD LN MARYLAND HEIGHTS Mailing Address 3201 PARKWOOD LE MARYLAND HEIGHTS PAUL L & MARTHA BARONE CAR 2101 NORTH ASH ST NEVADA Mailing Address 2101 N ASH ST NEVADA PEACE HAVEN ASSOCIATION 12630 ROTT RD	MO 63670-1858 R MO 63670-1858 AND REHABILITATION CENTER MO 63043-1334 N MO 63043-1334 RE CENTER MO 64772-1082 MO 64772-1082	Level of Care: ALF** County SAINTE GENEVIEVE Region 2 Telephone (314) 291-5911 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid TEMPORARY CLO Telephone (417) 448-3999 Level of Care: SNF County VERNON Region 1 Medicaid Telephone (314) 965-3833	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number SURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 23234 No 130 No 02471 Yes 40 No 16917

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PEARL'S II EDEN FOR ELDERS				
611 NORTH COLLEGE	Telephone	(660) 748-4407	Alzheimer's Unit	No
PRINCETON MO 6	54673-1051 Level of Car	re: SNF	Bed Capacity	60
Mailing Address 611 NORTH COLLEGE	County	MERCER	DMH Licensed	No
PRINCETON MO 6	Region 4	Medicare/Medicaid	Facility Number	06453
PETTIS COUNTY ASSISTED LIVING, LLC				
3017 BROOKING PARK AVENUE	Telephone	(660) 827-3222	Alzheimer's Unit	No
SEDALIA MO 6	55301-9327 Level of Car	re: ALF**	Bed Capacity	139
Mailing Address 3017 BROOKING PARK AVE	E County	PETTIS	DMH Licensed	Yes
_	55301-9327 Region 6		Facility Number	30112
				00112
	DEHADI FRATION GENTED THE			
PILLARS OF NORTH COUNTY HEALTH & 13700 OLD HALLS FERRY RD	· ·	(214) 255 0760	Alghoiman's II	NT.
	Telephone	(314) 355-0760	Alzheimer's Unit	No
	53033-4109 Level of Car		Bed Capacity	120
Mailing Address 13700 OLD HALLS FERRY R	·	SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 6	63033-4109 Region 7	Medicare/Medicaid	Facility Number	07440
PIN OAKS LIVING CENTER				
1525 WEST MONROE ST	Telephone	(573) 581-7261	Alzheimer's Unit	No
MEXICO MO 6	55265-1201 Level of Car	re: SNF	Bed Capacity	124
Mailing Address 1525 WEST MONROE ST	County	AUDRAIN	DMH Licensed	No
MEXICO MO 6	55265-1201 Region 5	Medicare/Medicaid	Facility Number	05804
PINE LODGE RESIDENTIAL CARE				
967 N MAPLE ST	Telephone	(417) 345-0310	Alzheimer's Unit	No
BUFFALO MO 6	55622-7568 Level of Car	re: RCF	Bed Capacity	20
Mailing Address 967 N MAPLE ST	County	DALLAS	DMH Licensed	No
	55622-7568 Region 1		Facility Number	25563
PINE VALLEY AT THE WOODLANDS				
620 WOODLAND MEADOWS	Telephone	(636) 202-1050	Alzheimer's Unit	No
ARNOLD MO 6	53010-2030 Level of Car	re: ALF**	Bed Capacity	48
Mailing Address 620 WOODLAND MEADOW		JEFFERSON	DMH Licensed	No
	53010-2030 Region 2	var and or v	Facility Number	31974
MO 0	Region 2		racinty rumber	31774
PINE VALLEY RCF				
3381 1st STREET	Telephone	(573) 760-8601	Alzheimer's Unit	No
	reiepnone			
	2627 2155 T L - C	DCE		
DOE RUN MO 6	53637-3155 Level of Cal		Bed Capacity	12
DOE RUN MO 6 Mailing Address 3381 1st STREET	County	re: RCF SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN MO 6 Mailing Address 3381 1st STREET				
DOE RUN MO 6 Mailing Address 3381 1st STREET DOE RUN MO 6	County		DMH Licensed	Yes
DOE RUN MO 6 Mailing Address 3381 1st STREET DOE RUN MO 6 PINE VIEW MANOR, INC	County Region 2	SAINT FRANCOIS	DMH Licensed Facility Number	Yes 08379
DOE RUN Mailing Address 3381 1st STREET DOE RUN MO 6 PINE VIEW MANOR, INC 307 NORTH PINEVIEW ST	County Region 2 Telephone	SAINT FRANCOIS (660) 783-2118	DMH Licensed Facility Number Alzheimer's Unit	Yes 08379 No
DOE RUN Mailing Address 3381 1st STREET DOE RUN MO 6 PINE VIEW MANOR, INC 307 NORTH PINEVIEW ST STANBERRY MO 6	County Region 2 Telephone Level of Car	(660) 783-2118 re: ALF**	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	Yes 08379 No 12
DOE RUN Mailing Address 3381 1st STREET DOE RUN MO 6 PINE VIEW MANOR, INC 307 NORTH PINEVIEW ST STANBERRY MO 6 Mailing Address 307 NORTH PINEVIEW ST	County Region 2 Telephone 54489-1509 Level of Car	SAINT FRANCOIS (660) 783-2118	DMH Licensed Facility Number Alzheimer's Unit	Yes 08379 No

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PINE VIEW MANOR, INC			
307 NORTH PINEVIEW ST		Telephone (660) 783-2118	Alzheimer's Unit No
STANBERRY MC	0 64489-1509	Level of Care: SNF	Bed Capacity 70
Mailing Address 307 NORTH PINEVIEW ST	Т	County GENTRY	DMH Licensed No
STANBERRY MO	0 64489-1509	Region 4 Medicare/Medicaid	Facility Number 05832
PIONEER SKILLED NURSING CENTER		T. 1 (660) 276 2001	
1500 SOUTH KANSAS AVE		Telephone (660) 376-2001	Alzheimer's Unit No
	0 64658-1716	Level of Care: SNF	Bed Capacity 96
Mailing Address 1500 S KANSAS AVE		County CHARITON	DMH Licensed No
MARCELINE MO	0 64658-1716	Region 5 Medicare/Medicaid	Facility Number 05900
PLEASANT HILL HEALTH AND REHAE	BILITATION CENTER		
1300 BROADWAY		Telephone (816) 540-2116	Alzheimer's Unit Yes
	0 64080-1842	Level of Care: SNF	Bed Capacity 90
Mailing Address 1300 BROADWAY	0.000 10.2	County CASS	DMH Licensed No
o contract of the contract of	0 64080-1842	Region 3 Medicare/Medicaid	Facility Number 15101
TEENS/IIVI IIIEE	7 01000 1012	Region 5 Medicare/Medicard	Taciney Number 15101
PLEASANT VALLEY MANOR			
213 DAVIS DR		Telephone (417) 257-0179	Alzheimer's Unit No
WEST PLAINS MO	0 65775-2274	Level of Care: RCF*	Bed Capacity 72
Mailing Address 213 DAVIS DR		County HOWELL	DMH Licensed No
WEST PLAINS MO	0 65775-2274	Region 1	Facility Number 13641
PLEASANT VALLEY MANOR CARE CE	NTER		
6814 SOBBIE RD		Telephone (816) 781-5277	Alzheimer's Unit No
	64068-9555	Level of Care: SNF	Bed Capacity 102
Mailing Address 6814 SOBBIE RD	04000 7333	County CLAY	DMH Licensed No
_	64068-9555	Region 4 Medicare/Medicaid	Facility Number 06020
EBERT	04000 7333	Region 4 Medicale/Medicalu	Taciney (value)
PLEASANT VIEW			
641 EUCLID AVE		Telephone (573) 406-1090	Alzheimer's Unit No
HANNIBAL MO	0 63401-2959	Level of Care: ALF**	Bed Capacity 41
Mailing Address 641 EUCLID AVE		County MARION	DMH Licensed No
HANNIBAL MO	0 63401-2959	Region 5	Facility Number 25358
PLEASANT VIEW			
470 RAINBOW DR		Telephone (660) 744-6252	Alzheimer's Unit No
	64482-1641	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 273	552 1011	County ATCHISON	DMH Licensed No
_	0 64482-0273	·	
NOCATORI MIC	, 0++02-U213	Region 4 Medicare/Medicaid	Facility Number 06041
POINT LOOKOUT NURSING & REHAB			
11103 HISTORIC HIGHWAY 165		Telephone (417) 334-4105	Alzheimer's Unit Yes
HOLLISTER MO	0 65672-6239	Level of Care: SNF	Bed Capacity 130
Mailing Address 11103 HISTORIC HIGHWA	AY 165	County TANEY	DMH Licensed No
HOLLISTER MO	0 65672-6239	Region 1 Medicare/Medicaid	Facility Number 12716

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POLARIS HEALTH & WELLNESS	OF ABBEY WOODS			
5026 FARAON ST		Telephone (816) 279-1591	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-3375	Level of Care: SNF	Bed Capacity 1	00
Mailing Address 5026 FARAON ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-3375	Region 4 Medicare/Medicaid	Facility Number 014	63
POLARIS HEALTH & WELLNESS	OF ASHTON COURT			
1200 WEST COLLEGE ST	of Asirion Court	Telephone (816) 781-3020	Alzheimer's Unit Y	es.
LIBERTY	MO 64068-1036	Level of Care: SNF		40
Mailing Address 1200 WEST COLLE		County CLAY		No
LIBERTY	MO 64068-1036	Region 4 Medicare/Medicaid	Facility Number 019	
LIBERTT	MO 04000-1030	Region - Medicare/Medicald	racinty Number 019	01
POLARIS HEALTH & WELLNESS	OF AUTUMN TERRACE			
6124 RAYTOWN RD		Telephone (816) 358-8222		es
RAYTOWN	MO 64133-4007	Level of Care: SNF		54
Mailing Address 6124 RAYTOWN R		County JACKSON		No
RAYTOWN	MO 64133-4007	Region 3 Medicare/Medicaid	Facility Number 007	68
POLARIS HEALTH & WELLNESS	OF BLUE RIVER			
10425 CHESTNUT DR		Telephone (816) 763-4444	Alzheimer's Unit Y	es
KANSAS CITY	MO 64137-3201	Level of Care: SNF	Bed Capacity 1	60
Mailing Address 10425 CHESTNUT	DR	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64137-3201	Region 3 Medicare/Medicaid	Facility Number 191	14
POLARIS HEALTH & WELLNESS	OF CAMERON			
801 EUCLID AVE	01 01111211011	Telephone (816) 632-7254	Alzheimer's Unit	No
CAMERON	MO 64429-2003	Level of Care: SNF		20
Mailing Address PO BOX 438		County CLINTON		No
CAMERON	MO 64429-0438	Region 4 Medicare/Medicaid	Facility Number 009	
			•	
DOL A DAG HATA A WAY O MARK A NARGO	OF GARAGE WAY			
POLARIS HEALTH & WELLNESS	OF CARMEL HILLS	T. I	A11 *	7
810 EAST WALNUT ST	MO (4050 4025	Telephone (816) 461-9600		es
INDEPENDENCE	MO 64050-4025	Level of Care: SNF		94
Mailing Address 810 EAST WALNUT		County JACKSON		No
INDEPENDENCE	MO 64050-4025	Region 3 Medicare/Medicaid	Facility Number 234	22
POLARIS HEALTH & WELLNESS	OF INDEPENDENCE			
1800 S SWOPE DR		Telephone (816) 257-2566	Alzheimer's Unit	es
INDEPENDENCE	MO 64057-1084	Level of Care: SNF	Bed Capacity 1	30
Mailing Address 1800 S SWOPE DR		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1084	Region 3 Medicare/Medicaid	Facility Number 220	63
POLARIS HEALTH & WELLNESS	OF KC SOUTH			
8033 HOLMES ROAD		Telephone (816) 363-6222	Alzheimer's Unit	No
KANSAS CITY	MO 64131-2115	Level of Care: SNF		00
Mailing Address 8033 HOLMES ROA		County JACKSON		No
KANSAS CITY	MO 64131-2115	Region 3 Medicare/Medicaid	Facility Number 036	
		3	•	

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POLARIS HEALTH & WELLNESS (OF LEE'S SUMMIT POINTE		
1501 SW 3RD ST		Telephone (816) 525-6300	Alzheimer's Unit No
LEE'S SUMMIT	MO 64081-2424	Level of Care: SNF	Bed Capacity 60
Mailing Address 1501 SW 3RD ST		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-2424	Region 3 Medicare/Medicaid	Facility Number 12484
POLARIS HEALTH & WELLNESS O	OF LIBERTY		
2201 GLENN HENDREN DR		Telephone (816) 736-8800	Alzheimer's Unit No
LIBERTY	MO 64068-3375	Level of Care: SNF	Bed Capacity 143
Mailing Address 2201 GLENN HENDE		County CLAY	DMH Licensed No
LIBERTY	MO 64068-3375	Region 4 Medicare/Medicaid	Facility Number 16715
DOLADIG HEALTH O WELLNESS	DE DAVIMODE		
POLARIS HEALTH & WELLNESS (600 EAST SUNRISE DR	OF RAYMORE	Telephone (816) 222 1001	Alahaiman'a Unit Vas
	MO 64082 0027	Telephone (816) 322-1991 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 152
RAYMORE Mailing Address 600 EAST SUNRISE	MO 64083-9037		Bed Capacity 152 DMH Licensed No
RAYMORE	MO 64083-9037		
KAIMOKE	MO 04083-9037	Region 3 Medicare/Medicaid	Facility Number 16170
POPA GOOD SAMARITAN SERVIC	ES, LLC		
16979 HWY 39	-, -	Telephone (417) 353-4448	Alzheimer's Unit Yes
VERONA	MO 65769-6319	Level of Care: ALF**	Bed Capacity 8
Mailing Address 16979 HWY 39		County LAWRENCE	DMH Licensed No
VERONA	MO 65769-6319	Region 1	Facility Number 30440
		9	·
PORTAGEVILLE HEALTH CARE O	CENTER		
290 WEST STATE HWY 162		Telephone (573) 379-2017	Alzheimer's Unit No
PORTAGEVILLE	MO 63873-9397	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 408		County NEW MADRID	DMH Licensed No
PORTAGEVILLE	MO 63873-0408	Region 2 Medicare/Medicaid	Facility Number 17119
PORTIA'S RESIDENTIAL CARE			
307 NORTH BROADWAY		Telephone (573) 686-3446	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-5103	Level of Care: RCF	Bed Capacity 20
Mailing Address 307 N BROADWAY	1110 03701 3103	County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-5103	Region 2	Facility Number 03002
		Region -	20002
POTOSI MANOR, INC			
307 SOUTH HIGHWAY 21		Telephone (573) 438-3225	Alzheimer's Unit No
POTOSI	MO 63664-9317	Level of Care: SNF	Bed Capacity 90
Mailing Address 307 SOUTH HIGHWA	AY 21	County WASHINGTON	DMH Licensed No
POTOSI	MO 63664-9317	Region 2 Medicare/Medicaid	Facility Number 21648
	N N G		
PREFERRED FAMILY HEALTHCA	RE, INC	T-lk (660) 665 1060	Alabata and Tiate
900 EAST LAHARPE	MO 62501 4520	Telephone (660) 665-1962	Alzheimer's Unit No
KIRKSVILLE Mailing Address DO POV 767	MO 63501-4520	Level of Care: RCF*	Bed Capacity 57 DMH Licensed Yes
Mailing Address PO BOX 767 KIRKSVILLE	MO 63501 0767	County ADAIR	
NINNS VILLE	MO 63501-0767	Region 5	Facility Number 21851

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PRIMROSE RETIREMENT COMMU	JNITY OF JEFFERSON CITY		
1214 FREEDOM BLVD		Telephone (573) 634-5408	Alzheimer's Unit No
JEFFERSON CITY	MO 65109-0082	Level of Care: ALF**	Bed Capacity 49
Mailing Address 1214 FREEDOM BLV	'D	County COLE	DMH Licensed No
JEFFERSON CITY	MO 65109-0082	Region 6	Facility Number 29697
PRIMROSE RETIREMENT COMMU	JNITY OF KANSAS CITY		
8559 NORTH LINE CREEK PARKWAY	Y	Telephone (816) 468-8282	Alzheimer's Unit No
KANSAS CITY	MO 64154-2100	Level of Care: ALF**	Bed Capacity 44
Mailing Address 8559 NORTH LINE C	REEK PARKWAY	County PLATTE	DMH Licensed No
KANSAS CITY	MO 64154-2100	Region 4	Facility Number 29020
	110 0113 1 2100	Region	racinty (uniber 25020
DRINGERON GENTOD I MING WHE			
PRINCETON SENIOR LIVING THE		Telephone (916) 975 4050	Alzheimer's Unit YES
1701 S E OLDHAM PARKWAY	NO 64001	Telephone (816) 875-4950	
LEE'S SUMMIT	MO 64081-	Level of Care: ALF**	Bed Capacity 68
Mailing Address 1701 S E OLDHAM P		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-	Region 3	Facility Number 32762
PROMISE CLIPE CENTER VI C			
PROMISE CARE CENTER, LLC			
1111 CARE AVE		Telephone (417) 494-5037	Alzheimer's Unit No
NIXA	MO 65714-9679	Level of Care: RCF	Bed Capacity 126
Mailing Address 1111 CARE AVE		County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9679	Region 1	Facility Number 15935
PUTNAM COUNTY CARE CENTER			
1814 OAK ST		Telephone (660) 947-2492	Alzheimer's Unit NO
UNIONVILLE	MO 63565-1275	Level of Care: SNF	Bed Capacity 60
Mailing Address 1814 OAK ST		County PUTNAM	DMH Licensed No
UNIONVILLE	MO 63565-1275	Region 5 Medicare/Medicaid	Facility Number 06516
DUVICO NUDCINO O DEULADU LA E	ION CENTED		
PUXICO NURSING & REHABILIAT	ION CENTER	TO 1 1 (572) 222 2125	A11.
540 NORTH HIGHWAY 51	140 50050 0445	Telephone (573) 222-3125	Alzheimer's Unit No
PUXICO	MO 63960-9117	Level of Care: SNF	Bed Capacity 60
Mailing Address 540 NORTH HWY 51		County STODDARD	DMH Licensed No
PUXICO	MO 63960-9117	Region 2 Medicare/Medicaid	Facility Number 03163
OHAH DIN HEALTH CADE CENT	P.D.		
QUAIL RUN HEALTH CARE CENT	en.	T-1	All-batter and Times
1405 WEST GRAND AVE	MO (4420 1110	Telephone (816) 632-2151	Alzheimer's Unit No
CAMERON	MO 64429-1118	Level of Care: SNF	Bed Capacity 84
Mailing Address PO BOX 525		County DEKALB	DMH Licensed No
CAMERON	MO 64429-0525	Region 4 Medicare/Medicaid	Facility Number 03829
QUALITY RESIDENTIAL CARE			
2034 WEST COLLEGE		Telephone (417) 831-6466	Alzheimer's Unit No
SPRINGFIELD	MO 65806-1524	Level of Care: RCF*	Bed Capacity 42
Mailing Address PO BOX 8127	1410 03000-1324	County GREENE	DMH Licensed Yes
	MO 65901 9127	•	
SPRINGFIELD	MO 65801-8127	Region 1	Facility Number 13150

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QUARTERS AT DES PERES, THE			
13230 MANCHESTER RD		Telephone (314) 821-2886	Alzheimer's Unit No
DES PERES	MO 63131-1706	Level of Care: SNF	Bed Capacity 147
Mailing Address 13230 MANCHESTE	ER RD	County SAINT LOUIS COUNTY	DMH Licensed No
DES PERES	MO 63131-1706	Region 7 Medicare/Medicaid	Facility Number 26726
RANCHO REHAB AND HEALTHCA	ARE CENTER		
615 RANCHO LN		Telephone (314) 839-2150	Alzheimer's Unit No
FLORISSANT	MO 63031-1717	Level of Care: SNF	Bed Capacity 120
Mailing Address 615 RANCHO LN		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63031-1717	Region 7 Medicare/Medicaid	Facility Number 02585
RATLIFF CARE CENTER			
717 NORTH SPRIGG		Telephone (573) 335-5810	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-4815	Level of Care: SNF	Bed Capacity 46
Mailing Address 717 NORTH SPRIGO		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-4815	Region 2 Medicare/Medicaid	Facility Number 17420
CAI E GIRARDEAU	1410 03701-4013	Region 2 Medical e/Medicald	racinty Number 17420
RAVENWOOD - ASSISTED LIVING	BY AMERICARE		
1950 EAST REPUBLIC RD		Telephone (417) 890-6000	Alzheimer's Unit Yes
SPRINGFIELD	MO 65804-6763	Level of Care: ALF**	Bed Capacity 66
Mailing Address 1950 E REPUBLIC R	RD	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65804-6763	Region 1	Facility Number 20791
RAVENWOOD TERRACE - ASSIST	ED LIVING BY AMERICARE		
1830 RAVENWOOD		Telephone (660) 263-8004	Alzheimer's Unit Yes
MOBERLY	MO 65270-3002	Level of Care: ALF**	Bed Capacity 55
Mailing Address 1830 RAVENWOOD		County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-3002	Region 5	Facility Number 16411
			•
REPUBLIC NURSING & REHAB			
901 EAST HIGHWAY 174		Telephone (417) 732-1822	Alzheimer's Unit Yes
REPUBLIC	MO 65738-1155	Level of Care: SNF	Bed Capacity 127
Mailing Address 901 EAST HIGHWA	Y 174	County GREENE	DMH Licensed No
REPUBLIC	MO 65738-1155	Region 1 Medicare/Medicaid	Facility Number 13684
REST HAVEN CONVALESCENT &	RETIREMENT HOME		
1800 SOUTH INGRAM		Telephone (660) 827-0845	Alzheimer's Unit No
SEDALIA	MO 65301-7538	Level of Care: SNF	Bed Capacity 86
Mailing Address 1800 S INGRAM		County PETTIS	DMH Licensed No
SEDALIA	MO 65301-7538	Region 6 Medicare/Medicaid	Facility Number 06582
SEPTEM 1		Aregion o intentent environtentu	2
RICHLAND CARE CENTER, INC			
400 TRI-COUNTY LANE		Telephone (573) 765-3243	Alzheimer's Unit No
RICHLAND	MO 65556-8582	Level of Care: SNF	Bed Capacity 86
Mailing Address PO BOX 756		County PULASKI	DMH Licensed No
RICHLAND	MO 65556-0756	Region 6 Medicare/Medicaid	Facility Number 08100

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RICHMOND TERRACE ASSISTED	LIVING			
1633 LACLEDE STATION RD		Telephone (314) 646-8000	Alzheimer's Unit No	
SAINT LOUIS	MO 63117-2038	Level of Care: ALF**	Bed Capacity 99	
Mailing Address 1633 LACLEDE STA		County SAINT LOUIS COUNTY	DMH Licensed No	
SAINT LOUIS	MO 63117-2038	Region 7	Facility Number 22269)
RIDGE CREST NURSING CENTER				
706 SOUTH MITCHELL		Telephone (660) 429-2177	Alzheimer's Unit Yes	s
WARRENSBURG	MO 64093-2828	Level of Care: SNF	Bed Capacity 120)
Mailing Address 706 SOUTH MITCHI	ELL	County JOHNSON	DMH Licensed No	
WARRENSBURG	MO 64093-2828	Region 3 Medicare/Medicaid	Facility Number 06640)
RIDGEVIEW ASSISTED LIVING CI	ENTED			
13134 STATE HIGHWAY 25	ENIER	Telephone (573) 624-4433	Alzheimer's Unit No	
DEXTER	MO 63841-9740	Level of Care: ALF**	Bed Capacity 26	
Mailing Address 13134 STATE HIGH		County STODDARD	DMH Licensed No	
DEXTER	MO 63841-9740	Region 2	Facility Number 10128	
DLATER	WIO 03041-7/40	Region 2	racinty runner 10128	,
RIDGEVIEW LIVING COMMUNIT	Y			
500 BARRETT DRIVE		Telephone (573) 276-3843	Alzheimer's Unit No)
MALDEN	MO 63863-1204	Level of Care: SNF	Bed Capacity 96	í
Mailing Address 500 BARRETT DRIV	Æ	County DUNKLIN	DMH Licensed No.)
MALDEN	MO 63863-1204	Region 2 Medicare/Medicaid	Facility Number 06656	<u>;</u>
RIDGEWAY RESIDENTIAL CARE				
431 RUSSELL		Telephone (573) 468-4318	Alzheimer's Unit No)
SULLIVAN	MO 63080-2228	Level of Care: ALF	Bed Capacity 20)
Mailing Address PO BOX 267		County FRANKLIN	DMH Licensed Yes	s
SULLIVAN	MO 63080-0267	Region 6	Facility Number 06668	;
RIVER CITY LIVING COMMUNITY	v			
3038 WEST TRUMAN BLVD	•	Telephone (573) 893-3404	Alzheimer's Unit Yes	2
JEFFERSON CITY	MO 65109-0525	Level of Care: SNF	Bed Capacity 87	
Mailing Address 3038 WEST TRUMA		County COLE	DMH Licensed No	
JEFFERSON CITY	MO 65109-0525	Region 6 Medicare/Medicaid	Facility Number 04826	
DWDD 0000000000000000000000000000000000				
RIVER CROSSING OF CREVE COE	EUR	m		
11278 SCHUETZ RD	NO (214) 4057	Telephone (314) 991-4066	Alzheimer's Unit No	
SAINT LOUIS	MO 63146-4957	Level of Care: SNF	Bed Capacity 120	
Mailing Address 11278 SCHUETZ RD		County SAINT LOUIS COUNTY	DMH Licensed No	
SAINT LOUIS	MO 63146-4957	Region 7 Medicare/Medicaid	Facility Number 16378	i
RIVER MIST - ASSISTED LIVING F	BY AMERICARE			
2050 WEST MAUD		Telephone (573) 686-2833	Alzheimer's Unit No)
POPLAR BLUFF	MO 63901-4000	Level of Care: ALF**	Bed Capacity 42	!
Mailing Address 2050 WEST MAUD		County BUTLER	DMH Licensed No)
POPLAR BLUFF	MO 63901-4000	Region 2	Facility Number 20291	

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RIVER OAKS CARE CENTER				
1001 NORTH WALNUT		Telephone (573) 695-2121	Alzheimer's Unit	No
STEELE	MO 63877-1355	Level of Care: SNF	Bed Capacity	90
Mailing Address 1001 N WALNUT		County PEMISCOT	DMH Licensed	No
STEELE	MO 63877-1355	Region 2 Medicare/Medicaid	Facility Number	06672
RIVERBEND HEIGHTS HEALTH &	& REHABILITATION			
1221 HIGHWAY 13 SOUTH		Telephone (660) 259-4695	Alzheimer's Unit	Yes
LEXINGTON	MO 64067-7187	Level of Care: SNF	Bed Capacity	154
Mailing Address 1221 HIGHWAY 13 S		County LAFAYETTE	DMH Licensed	No
LEXINGTON	MO 64067-7187	Region 3 Medicare/Medicaid	Facility Number	04333
RIVERDELL CARE CENTER				
1121 11TH ST		Telephone (660) 882-7600	Alzheimer's Unit	No
BOONVILLE	MO 65233-1419	Level of Care: SNF	Bed Capacity	60
Mailing Address 1121 11TH ST		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-1419	Region 6 Medicare/Medicaid	Facility Number	14428
BOOKVIELE	110 00200 1117	Region 6 Medical Civicultation	Tuenty Tuniber	14420
RIVERSIDE NURSING & REHABIL	ITATION CENTER, LLC			
4700 NW CLIFFVIEW DR		Telephone (816) 741-5105	Alzheimer's Unit	No
RIVERSIDE	MO 64150-1237	Level of Care: SNF	Bed Capacity	180
Mailing Address 4700 NW CLIFFVIEV	W DR	County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-1237	Region 4 Medicare/Medicaid	Facility Number	01532
RIVERSIDE PLACE				
1616 WEISENBORN RD		Telephone (816) 232-9874	Alzheimer's Unit	No
SAINT JOSEPH	MO 64507-2527	Level of Care: ALF	Bed Capacity	100
Mailing Address 1616 WEISENBORN		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64507-2527	Region 4	Facility Number	10346
SARVI JOSEI II	WIO 04307-2327	Region 4	Pacinty Number	10340
RIVERSIDE PLACE				
1616 WEISENBORN RD		Telephone (816) 232-9874	Alzheimer's Unit	Yes
SAINT JOSEPH	MO 64507-2527	Level of Care: SNF	Bed Capacity	90
Mailing Address 1616 WEISENBORN	RD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64508-2527	Region 4 Medicare/Medicaid	Facility Number	10346
RIVERVIEW AT THE PARK CARE	AND REHABILITATION CENTER			
1100 PROGRESS PARKWAY		Telephone (573) 883-3454	Alzheimer's Unit	Yes
SAINTE GENEVIEVE	MO 63670-9232	Level of Care: SNF	Bed Capacity	120
Mailing Address 1100 PROGRESS PA		County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE	MO 63670-9232	Region 2 Medicare/Medicaid	Facility Number	06729
S.M. I.D. GENEVIEVE		region 2 Prictical C/Prictical C	Tuesdy Humber	00129
RIVERVIEW NURSING CENTER				
10303 STATE RD C		Telephone (573) 676-3136	Alzheimer's Unit	No
MOKANE	MO 65059-1211	Level of Care: SNF	Bed Capacity	60
Mailing Address 10303 STATE RD C		County CALLAWAY	DMH Licensed	No
MOVANE	MO 65050 1211	D	Facility Number	0.6720

Region 6

Medicare/Medicaid

Facility Number

06730

MO 65059-1211

MOKANE

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RIVERVIEW RESIDENTIAL PLACE	<u>s</u>	T. I. I. (417) 591 2510	Al Latina Latin
1200 WEST HALL ST	MO (5721 0102	Telephone (417) 581-2510	Alzheimer's Unit No
OZARK	MO 65721-9103	Level of Care: RCF*	Bed Capacity 40
Mailing Address PO BOX 157	MO (572) 0157	County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-0157	Region 1	Facility Number 01426
RIVERVIEW, THE			
5500 SOUTH BROADWAY		Telephone (314) 353-5900	Alzheimer's Unit No
SAINT LOUIS	MO 63111-2025	Level of Care: SNF	Bed Capacity 130
Mailing Address 5500 S BROADWAY		County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63111-2025	Region 7 Medicare/Medicaid	Facility Number 02273
RIVERVIEW, THE 5500 SOUTH BROADWAY		Telephone (314) 353-5900	Alzheimer's Unit No
SAINT LOUIS	MO 63111-2025	Level of Care: RCF*	Bed Capacity 11
Mailing Address 5500 S BROADWAY	140 03111 2023	County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63111-2025	Region 7	Facility Number 02273
STAINT LOCKS	110 03111 2023	Acgion /	runny runny
RIVERWAYS MANOR			
403 WATERCRESS RD		Telephone (573) 323-4282	Alzheimer's Unit No
VAN BUREN	MO 63965-9100	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 969		County CARTER	DMH Licensed No
VAN BUREN	MO 63965-0969	Region 2 Medicare/Medicaid	Facility Number 06744
ROARING RIVER HEALTH AND RI	EHABILITATION		
812 OLD EXETER RD	110 (25/25 150)	Telephone (417) 847-2184	Alzheimer's Unit Yes
CASSVILLE	MO 65625-1704	Level of Care: SNF	Bed Capacity 90
Mailing Address 812 OLD EXETER RI		County BARRY	DMH Licensed No
CASSVILLE	MO 65625-1704	Region 1 Medicare/Medicaid	Facility Number 10644
ROCK ISLAND VILLAGE			
619 EAST 8TH STREET		Telephone (573) 557-9545	Alzheimer's Unit Yes
ELDON	MO 65026-4740	Level of Care: ALF**	Bed Capacity 70
Mailing Address 619 EAST 8TH STRE	ET	County MILLER	DMH Licensed No
ELDON	MO 65026-4740	Region 6	Facility Number 30865
ROCK POINT NURSING CENTER			
8477 NORTH STREET		Telephone (573) 292-3212	Alzheimer's Unit Yes
BIRCH TREE	MO 65438-8887	-	
Mailing Address 8477 NORTH STREE		Level of Care: SNF County SHANNON	Bed Capacity 86 DMH Licensed No
BIRCH TREE	MO 65438-8887	•	Facility Number 00560
DINCH TREE	1410 03430-0007	Region 2 Medicare/Medicaid	racinty number 00500
ROCKHILL MANOR ASSISTED LIV	/ING		
4235 LOCUST ST		Telephone (816) 931-2225	Alzheimer's Unit No
KANSAS CITY	MO 64110-1016	Level of Care: ALF	Bed Capacity 154
Mailing Address PO BOX 5930		County JACKSON	DMH Licensed Yes
KANSAS CITY	MO 64171-0930	Region 3	Facility Number 06794

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ROCKHILL MANOR ASSISTED LI				
	IVING	T. I. I. (016) 021 2225	A1 1	N
4235 LOCUST ST	MO (4110 1016	Telephone (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY	MO 64110-1016	Level of Care: ALF**	Bed Capacity	36 V
Mailing Address PO BOX 5930	MO (4171 0020	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64171-0930	Region 3	Facility Number	06794
ROCKY RIDGE MANOR				
3111 HIGHWAY A		Telephone (417) 924-8116	Alzheimer's Unit	No
MANSFIELD	MO 65704-8105	Level of Care: SNF	Bed Capacity	65
Mailing Address 3111 HWY A		County WRIGHT	DMH Licensed	No
MANSFIELD	MO 65704-8105	Region 1 Medicare/Medicaid	Facility Number	04996
DOLLA MEALTH & DEMARK FOR	THON CHITTEE			
ROLLA HEALTH & REHABILITA 1200 MCCUTCHEN RD	HON SUITES	Telephone (573) 364-2311	Alzheimer's Unit	Yes
ROLLA	MO 65401-2615	Telephone (573) 364-2311 Level of Care: SNF	Bed Capacity	116
Mailing Address 1200 MCCUTCHEN		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2615	Region 6 Medicare/Medicaid	Facility Number	08862
ROLLA	WO 03401-2013	Region o Medicare/Medicaid	Pacinty Number	08802
ROLLA PRESBYTERIAN MANOR				
1200 HOMELIFE PLAZA		Telephone (573) 364-7336	Alzheimer's Unit	Yes
ROLLA	MO 65401-2512	Level of Care: ALF**	Bed Capacity	37
Mailing Address 1200 HOMELIFE PI	LAZA	County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2512	Region 6	Facility Number	18727
DOLLA BRECRYTERIAN MANOR				
ROLLA PRESBYTERIAN MANOR		Telephone (572) 264 7226	Alahaiman'a Unit	No
1200 HOMELIFE PLAZA ROLLA	MO 65401-2512	Telephone (573) 364-7336 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 30
KULLA				30
Mailing Address 1200 HOMELIFE PI	LAZA	County PHELPS	DMH Licensed	No
Mailing Address 1200 HOMELIFE PI	AZA MO 65401-2512	County PHELPS	DMH Licensed	No
Mailing Address 1200 HOMELIFE PI ROLLA	AZA MO 65401-2512	County PHELPS	DMH Licensed	No
Mailing Address 1200 HOMELIFE PI ROLLA ROSEWOOD REHAB AND HEALT	AZA MO 65401-2512	County PHELPS Region 6 Medicare/Medicaid	DMH Licensed Facility Number	No 18727
Mailing Address 1200 HOMELIFE PI ROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK	MO 65401-2512 THCARE CENTER MO 64050-2590	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500	DMH Licensed Facility Number Alzheimer's Unit	No 18727 Yes
Mailing Address 1200 HOMELIFE PI ROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE	MO 65401-2512 THCARE CENTER MO 64050-2590	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 18727 Yes 300
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 18727 Yes 300 No
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18727 Yes 300 No 06604
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18727 Yes 300 No
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA	MO 65401-2512 THCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 18727 Yes 300 No 06604
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA Mailing Address 13450 COUNTY RD	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF County PHELPS	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 18727 Yes 300 No 06604 No 9
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA	MO 65401-2512 THCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	No 18727 Yes 300 No 06604
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA Mailing Address 13450 COUNTY RD	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122 O 7040 MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF County PHELPS Region 6	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	No 18727 Yes 300 No 06604 No 9
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA Mailing Address 13450 COUNTY RD ROLLA ROYAL OAK NURSING & REHAB 4960 LACLEDE AVE	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122 O 7040 MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF County PHELPS Region 6 Telephone (314) 361-6240	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18727 Yes 300 No 06604 No 21083
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA Mailing Address 13450 COUNTY RD ROLLA ROYAL OAK NURSING & REHAB 4960 LACLEDE AVE SAINT LOUIS	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122 O 7040 MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF County PHELPS Region 6 Telephone (314) 361-6240 Level of Care: SNF	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18727 Yes 300 No 06604 No 21083
Mailing Address 1200 HOMELIFE PIROLLA ROSEWOOD REHAB AND HEALT 1415 WEST WHITE OAK INDEPENDENCE Mailing Address 1415 WEST WHITE INDEPENDENCE ROSEWOOD RESIDENTIAL CARI 13450 COUNTY RD 7040 ROLLA Mailing Address 13450 COUNTY RD ROLLA ROYAL OAK NURSING & REHAB 4960 LACLEDE AVE	MO 65401-2512 CHCARE CENTER MO 64050-2590 OAK MO 64050-2590 E MO 65401-8122 O 7040 MO 65401-8122	County PHELPS Region 6 Medicare/Medicaid Telephone (816) 254-3500 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid Telephone (573) 341-8000 Level of Care: RCF County PHELPS Region 6 Telephone (314) 361-6240	DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 18727 Yes 300 No 06604 No 21083

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ROYAL OAKS RESIDENCE				
507 EAST MARSHALL		Telephone (660) 335-6500	Alzheimer's Unit	No
SWEET SPRINGS	MO 65351-9759	Level of Care: ALF	Bed Capacity	51
Mailing Address PO BOX 204		County SALINE	DMH Licensed	Yes
SWEET SPRINGS	MO 65351-0204	Region 5	Facility Number	14953
SADDLER RESIDENTIAL CARE F	ACH ITY INC			
730 HODIAMONT AVE	ACILITI INC	Telephone (314) 725-3709	Alzheimer's Unit	No
SAINT LOUIS	MO 63112-2002	Level of Care: ALF	Bed Capacity	20
Mailing Address 730 HODIAMONT A		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63112-2002	Region 7	Facility Number	16828
SAMAT EGGIS	1410 03112 2002	Region /	racinty rumber	10020
SALEM CARE CENTER				
1203 NORTH JACKSON		Telephone (573) 729-6649	Alzheimer's Unit	No
SALEM	MO 65560-1076	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 29		County DENT	DMH Licensed	No
SALEM	MO 65560-0029	Region 6 Medicaid	Facility Number	02354
SALEM RESIDENTIAL CARE				
1207 EAST ROOSEVELT ST		Telephone (573) 729-9449	Alzheimer's Unit	No
SALEM	MO 65560-9676	Level of Care: RCF*	Bed Capacity	35
Mailing Address 1207 EAST ROOSE		County DENT	DMH Licensed	No
SALEM	MO 65560-9676	Region 6	Facility Number	19746
				177.10
SALT RIVER COMMUNITY CARE				
142 SHELBY PLAZA RD		Telephone (573) 588-4175	Alzheimer's Unit	Yes
SHELBINA	MO 63468-1065	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 529		County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-0529	Region 5 Medicare/Medicaid	Facility Number	06934
SARCOXIE NURSING CENTER				
1505 MINER		Telephone (417) 548-3434	Alzheimer's Unit	No
SARCOXIE	MO 64862-9211	Level of Care: SNF	Bed Capacity	40
Mailing Address PO BOX 248		County JASPER	DMH Licensed	No
SARCOXIE	MO 64862-0248	Region 1 Medicare/Medicaid	Facility Number	06864
CCENIC NUDCING AND DEHABII	ITATION CENTED II C			
SCENIC NURSING AND REHABIL 1333 SCENIC DR	HALION CENTER, LLC	Telephone (636) 931-2995	Alzheimer's Unit	Yes
	MO 62049 1550			
HERCULANEUM Mailing Address 1222 SCENIC DR	MO 63048-1550	Level of Care: SNF	Bed Capacity	189
Mailing Address 1333 SCENIC DR	MO (2049 1550	County JEFFERSON	DMH Licensed	No
HERCULANEUM	MO 63048-1550	Region 2 Medicare/Medicaid	Facility Number	09605
SCHUYLER COUNTY NURSING H	OME			
1306 US HIGHWAY 63		Telephone (660) 766-2291	Alzheimer's Unit	No
QUEEN CITY	MO 63561-2251	Level of Care: SNF	Bed Capacity	60
Mailing Address 1306 US HIGHWAY	63	County SCHUYLER	DMH Licensed	No
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Divili Electised	110
QUEEN CITY	MO 63561-2251	Region 5 Medicare/Medicaid	Facility Number	07004

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SEASONS REHAB AND HEALTHC	ARE CENTER			
15600 WOODS CHAPEL RD		Telephone (816) 478-4757	Alzheimer's Unit	Yes
KANSAS CITY	MO 64139-1261	Level of Care: SNF	Bed Capacity	78
Mailing Address 15600 WOODS CHA		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64139-1261	Region 3 Medicare/Medicaid	Facility Number	23712
SECRET GARDENS				
351 KEITH ST		Telephone (573) 518-0444	Alzheimer's Unit	No
PARK HILLS	MO 63601-2049	Level of Care: RCF	Bed Capacity	10
Mailing Address PO BOX 481		County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS	MO 63601-0481	Region 2	Facility Number	17813
SENATH SOUTH HEALTH CARE	CENTER			
300 EAST HORNBECK ST		Telephone (573) 738-2627	Alzheimer's Unit	No
SENATH	MO 63876-9225	Level of Care: SNF	Bed Capacity	150
Mailing Address PO BOX 940	1110 050,0 > 225	County DUNKLIN	DMH Licensed	No
SENATH	MO 63876-0940	Region 2 Medicare/Medicaid	Facility Number	16147
	110 03070 0710	Region 2 Medicare/Medicard	Tuelley Tulliser	10147
SENECA HOME PLACE				
2400 SOUTH CHEROKEE AVE		Telephone (417) 776-8053	Alzheimer's Unit	No
SENECA	MO 64865-9323	Level of Care: RCF*		30
			Bed Capacity	
Mailing Address 2400 SOUTH CHER		County NEWTON	DMH Licensed	No
SENECA	MO 64865-9323	Region 1	Facility Number	17571
SENECA HOUSE				
		Telephone (417) 776 9041	Alahaiman'a Unit	No
914 CHICKESAW ST	MO (4965 0201	Telephone (417) 776-8041	Alzheimer's Unit	No
914 CHICKESAW ST SENECA	MO 64865-9281	Level of Care: SNF	Bed Capacity	80
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S	Γ	Level of Care: SNF County NEWTON	Bed Capacity DMH Licensed	80 No
914 CHICKESAW ST SENECA		Level of Care: SNF	Bed Capacity	80
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA	Γ	Level of Care: SNF County NEWTON	Bed Capacity DMH Licensed	80 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER	Γ	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	80 No 17090
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72	Т МО 64865-9281	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	80 No 17090 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM	Γ	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	80 No 17090 No 90
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746	MO 64865-9281 MO 65560-7217	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM	Т МО 64865-9281	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	80 No 17090 No 90
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM	MO 64865-9281 MO 65560-7217 MO 65560-0746	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN	MO 64865-9281 MO 65560-7217 MO 65560-0746	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63	MO 64865-9281 MO 65560-7217 MO 65560-0746	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER	MO 64865-9281 MO 65560-7217 MO 65560-0746 WITER MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROU	MO 64865-9281 MO 65560-7217 MO 65560-0746 STER MO 65791-1415 UTE 63	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF County OREGON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER	MO 64865-9281 MO 65560-7217 MO 65560-0746 WITER MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROUTHAYER	MO 64865-9281 MO 65560-7217 MO 65560-0746 STER MO 65791-1415 JTE 63 MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF County OREGON	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROUTHAYER SHANGRI-LA REHAB & LIVING CO	MO 64865-9281 MO 65560-7217 MO 65560-0746 STER MO 65791-1415 JTE 63 MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROUTHAYER SHANGRI-LA REHAB & LIVING CEN 930 NORTH EAST DUNCAN RD	MO 64865-9281 MO 65560-7217 MO 65560-0746 WIER MO 65791-1415 WIE 63 MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROUTHAYER SHANGRI-LA REHAB & LIVING CO 930 NORTH EAST DUNCAN RD BLUE SPRINGS	MO 64865-9281 MO 65560-7217 MO 65560-0746 WIER MO 65791-1415 WENTER MO 65791-1415 MO 64014-2173	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid Telephone (816) 229-6677 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROUTHAYER SHANGRI-LA REHAB & LIVING CEN 930 NORTH EAST DUNCAN RD	MO 64865-9281 MO 65560-7217 MO 65560-0746 WIER MO 65791-1415 WENTER MO 65791-1415 MO 64014-2173	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364

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SHELBINA VILLA LIFECARE				
218 EAST SHELBINA AVE		Telephone (573) 588-4115	Alzheimer's Unit	No
SHELBINA	MO 63468-4328	Level of Care: ALF**	Bed Capacity	68
Mailing Address 218 EAST SHELBIN	JA AVE	County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-4328	Region 5	Facility Number	18584
	C CENTED			
SHEPHERD OF THE HILLS LIVIN 996 STATE HIGHWAY 248	GCENIER	Telephone (417) 334-6431	Alzheimer's Unit	No
BRANSON	MO 65616-8154	Telephone (417) 334-6431 Level of Care: SNF	Bed Capacity	100
Mailing Address 996 STATE HWY 24		County TANEY	DMH Licensed	No
BRANSON	MO 65616-8154		Facility Number	06810
BRANSON	WO 03010-8134	Region 1 Medicare/Medicaid	racinty Number	00810
SHEPHERD'S VIEW ASSISTED LIV	VING			
100 SHEPHERDS LN		Telephone (417) 778-7959	Alzheimer's Unit	No
ALTON	MO 65606-0429	Level of Care: ALF**	Bed Capacity	39
Mailing Address PO BOX 429		County OREGON	DMH Licensed	No
ALTON	MO 65606-0429	Region 2	Facility Number	23135
SHIRKEY NURSING & REHABILI	TATION CENTER			
804 WOLLARD BLVD		Telephone (816) 776-5403	Alzheimer's Unit	Yes
RICHMOND	MO 64085-2227	Level of Care: SNF	Bed Capacity	197
Mailing Address 804 WOLLARD BLV	VD	County RAY	DMH Licensed	No
RICHMOND	MO 64085-2227	Region 4 Medicare/Medicaid	Facility Number	07289
SIKESTON CONVALESCENT CEN	TER			
103 KENNEDY DR		Telephone (573) 471-6900	Alzheimer's Unit	Yes
SIKESTON	MO 63801-5126	Level of Care: SNF	Bed Capacity	120
Mailing Address 103 KENNEDY DR		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-5126	Region 2 Medicare/Medicaid	Facility Number	07331
SILEX COMMUNITY CARE				
111 DUNCAN MANSION RD		Telephone (573) 384-5218	Alzheimer's Unit	No
SILEX	MO 63377-2229	Level of Care: SNF	Bed Capacity	60
Mailing Address 111 DUNCAN MAN	ISION RD	County LINCOLN	DMH Licensed	No
SILEX	MO 63377-2229	Region 5 Medicare/Medicaid	Facility Number	06838
		9	•	
CH EV DECIDENTIAL HOME LLC	•			
SILEX RESIDENTIAL HOME, LLC	•	T-1 (572) 294 5212	A 1-1	No
145 DUNCAN MANSION RD	MO 62277 2220	Telephone (573) 384-5213 Level of Care: RCF*	Alzheimer's Unit	No
SILEX	MO 63377-2229		Bed Capacity	60
Mailing Address 145 DUNCAN MAN		County LINCOLN	DMH Licensed	Yes
SILEX	MO 63377-2229	Region 5	Facility Number	20982
SILVER CREEK - ASSISTED LIVIN	NG BY AMERICARE			
3325 TEXAS AVE		Telephone (417) 626-8100	Alzheimer's Unit	Yes
JOPLIN	MO 64804-4343	Level of Care: ALF**	Bed Capacity	68
Mailing Address 3325 TEXAS AVE	MO 64804 4242	County NEWTON	DMH Licensed	No
		••••		20541

Region 1

Facility Number

20541

MO 64804-4343

JOPLIN

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SILVER SPUR				
3300 TEXAS AVE		Telephone (314) 773-3408	Alzheimer's Unit	No
SAINT LOUIS	MO 63118-3111	Level of Care: ALF	Bed Capacity	37
Mailing Address 3300 TEXAS AVE		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63118-3111	Region 7	Facility Number 0	00185
SILVERADO LEE'S SUMMIT				
3101 SW 3RD STREET		Telephone (816) 321-1648	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64081-4060	Level of Care: ALF**	Bed Capacity	54
Mailing Address 3101 SW 3RD STREE	ET	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-4060	Region 3	Facility Number 3	31077
SILVERSTONE PLACE				
2735 EAGLESON DR		Telephone (573) 426-6200	Alzheimer's Unit	No
ROLLA	MO 65401-8384	Level of Care: SNF	Bed Capacity	110
Mailing Address 2735 EAGLESON DR		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-8384	·		
ROLLA	WIO 03401-8384	Region 6 Medicare/Medicaid	racinity Number 2	29351
SISTERS MISSION				
3225 N FLORISSANT AVE		Telephone (314) 421-6022	Alzheimer's Unit	No
SAINT LOUIS	MO 63107-3521	Level of Care: SNF	Bed Capacity	47
Mailing Address 3225 N FLORISSANT	ΓAVE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63107-3521	Region 7 Medicare/Medicaid	Facility Number 0)4563
SKYLINE ASSISTED LIVING LLC				
100 HARD ROCK RD		Telephone (573) 323-2108	Alzheimer's Unit	No
VAN BUREN	MO 63965-7259	Level of Care: ALF**	Bed Capacity	26
Mailing Address PO BOX 780		County CARTER	DMH Licensed	Yes
VAN BUREN	MO 63965-0780	Region 2	Facility Number 2	29947
		C		
CMILEV MANOD LLC				
SMILEY MANOR LLC 5415 THEKLA AVE		Telephone (314) 932-1360	Alzheimer's Unit	No
SAINT LOUIS	MO 63120-2513	Level of Care: RCF		20
	WIO 03120-2313	County SAINT LOUIS CITY	Bed Capacity DMH Licensed	
Mailing Address 5415 THEKLA AVE	MO 62120 2512			Yes
SAINT LOUIS	MO 63120-2513	Region 7	racinty Number 0)4078
SMILEY MANOR WEST, LLC				
1119 GOODFELLOW BLVD		Telephone (314) 833-3238	Alzheimer's Unit	No
SAINT LOUIS	MO 63112-	Level of Care: RCF	Bed Capacity	27
Mailing Address 1119 GOODFELLOW	/ BLVD	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63112-	Region 7	Facility Number 3	31147
SONSHINE MANOR				
300 SOUTH COTTONWOOD AVE		Telephone (417) 732-2929	Alzheimer's Unit	No
		-		CO
REPUBLIC	MO 65738-2093	Level of Care: SNF	Bed Capacity	69
REPUBLIC Mailing Address 300 SOUTH COTTON		Level of Care: SNF County GREENE	Bed Capacity DMH Licensed	No
			DMH Licensed	

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SOUTH COUNTY NURSING HOME, INC			
1101 WEST OUTER 21 RD	Telephone (636) 296-5455	Alzheimer's Unit	No
ARNOLD MO 63010-4644	Level of Care: SNF	Bed Capacity	153
Mailing Address 1101 WEST OUTER 21 RD	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-4644	Region 2 Medicare/Medicaid	Facility Number	03650
SOUTH HAMPTON PLACE			
4700 BRANDON WOODS	Telephone (573) 874-3674	Alzheimer's Unit	No
COLUMBIA MO 65203-7169	Level of Care: SNF	Bed Capacity	100
Mailing Address 4700 BRANDON WOODS	County BOONE	DMH Licensed	No
COLUMBIA MO 65203-7169	Region 6 Medicare/Medicaid	Facility Number	19799
SOUTH HAVEN RESIDENTIAL CARE CENTER, LLC	Talanhana (572) 429 4150	Alabeimon's Unit	No
10462 AIRPORT RD MINERAL POINT MO 63660-9325	Telephone (573) 438-4150	Alzheimer's Unit	No 20
	Level of Care: RCF*	Bed Capacity	20 V
Mailing Address 10462 AIRPORT RD	County WASHINGTON	DMH Licensed	Yes
MINERAL POINT MO 63660-9325	Region 2	Facility Number	10529
SOUTH POINTE - ASSISTED LIVING BY AMERICARE			
5125 OLD HWY 100	Telephone (636) 239-0670	Alzheimer's Unit	Yes
WASHINGTON MO 63090-3855	Level of Care: ALF**	Bed Capacity	72
Mailing Address 5125 OLD HWY 100	County FRANKLIN	DMH Licensed	No
WASHINGTON MO 63090-3855	Region 6	Facility Number	13735
SOUTH VIEW HEALTH CARE, LLC	T. 1. 1. (415) 255 2222		3.7
951 CREAMERY ROAD	Telephone (417) 255-9322	Alzheimer's Unit	No
WEST PLAINS MO 65775-6052	Level of Care: RCF*	Bed Capacity	32
Mailing Address PO BOX 88	County HOWELL	DMH Licensed	Yes
WEST PLAINS MO 65775-0088	Region 1	Facility Number	23567
SOUTHAVEN			
612 SOUTH BYPASS EAST	Telephone (573) 888-9213	Alzheimer's Unit	No
KENNETT MO 63857-3240	Level of Care: RCF*	Bed Capacity	36
Mailing Address 612 SOUTH BYPASS EAST	County DUNKLIN	DMH Licensed	No
KENNETT MO 63857-3240	Region 2	Facility Number	24336
SOUTHBROOK NURSING CENTER			
1101 HAZEL LANE	Telephone (573) 756-6658	Alzheimer's Unit	No
FARMINGTON MO 63640-1920	Level of Care: SNF	Bed Capacity	104
Mailing Address 1101 HAZEL LANE	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO 63640-1920	Region 2 Medicare/Medicaid	Facility Number	02577
1.11.11.101011	region 2 Medical Civicultatu	Tuenty Number	02311
SOUTHGATE LIVING CENTER			
500 TRUMAN BLVD	Telephone (573) 333-5150	Alzheimer's Unit	No
CARUTHERSVILLE MO 63830-1261	Level of Care: SNF	Bed Capacity	94
Mailing Address 500 TRUMAN BLVD	County PEMISCOT	DMH Licensed	No
CARUTHERSVILLE MO 63830-1261	Region 2 Medicare/Medicaid	Facility Number	01081

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SOUTHSIDE TOWNE HOUSE					
510 SOUTH WASHINGTON		Telephone	(573) 581-3203	Alzheimer's Unit	No
MEXICO	MO 65265-2786	Level of Care:	RCF*	Bed Capacity	12
Mailing Address PO BOX 6		County AUI	DRAIN	DMH Licensed	Yes
MEXICO	MO 65265-0006	Region 5		Facility Number	16987
SOUTHVIEW ASSISTED LIVING					
9916 REAVIS ROAD		Telephone	(314) 544-4440	Alzheimer's Unit	Yes
	MO 63123-5314	Level of Care:	ALF**	Bed Capacity	116
Mailing Address 9916 REAVIS RD			NT LOUIS COUNTY	DMH Licensed	No
e e	MO 63123-5314	Region 7		Facility Number	28446
		ingion -			200
CDECIAL EODCE FAMILY MINISTER	TEC				
SPECIAL FORCE FAMILY MINISTRI 428 SOUTH HARRISON ST	ES	Telephone	(417) 725-7917	Alzheimer's Unit	No
	MO 65714-7809	Level of Care:	RCF	Bed Capacity	12
Mailing Address PO BOX 882	WIO 03/14-7809		RISTIAN	DMH Licensed	Yes
	MO 65714-0882	Region 1	NISTIAN	Facility Number	18764
MAA	WIO 03/14-0882	Region 1		racinty Number	18/04
	a n y 11 mny a ny				
SPENCER PLACE - ASSISTED LIVING	G BY AMERICARE		(606) 441 6660		
265 SPENCER RD	MO 62276 2422	Telephone	(636) 441-6662	Alzheimer's Unit	No
	MO 63376-2430	Level of Care:	ALF**	Bed Capacity	74 N
Mailing Address 265 SPENCER RD	MO 62276 2420		NT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2430	Region 5		Facility Number	13294
SPRING MANOR					
3610 PALM ST		Telephone	(314) 533-3111	Alzheimer's Unit	No
	MO 63107-2505	Level of Care:	ALF**	Bed Capacity	94
Mailing Address 3610 PALM ST		•	NT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63107-2505	Region 7		Facility Number	28552
SPRING RIDGE - ASSISTED LIVING	BY AMERICARE		(445) 000 5400		
2828 SOUTH MEADOWBROOK	110 55005 5005	Telephone	(417) 889-7100	Alzheimer's Unit	No
	MO 65807-5925	Level of Care:	ALF**	Bed Capacity	44
Mailing Address 2828 SOUTH MEADOV		•	EENE	DMH Licensed	No
SPRINGFIELD	MO 65807-5925	Region 1		Facility Number	19713
SPRING RIVER CHRISTIAN VILLAG	E, INC		(115) (22, 1212		
201 S NORTHPARK LN	MO (1001 040)	Telephone	(417) 623-4313	Alzheimer's Unit	No
	MO 64801-8426	Level of Care:	ALF**	Bed Capacity	93
Mailing Address 201 S NORTHPARK LN		•	PER	DMH Licensed	No
JOPLIN	MO 64801-8426	Region 1		Facility Number	14251
ODDING DIVID GYDYGDY AV YAY YA	E DIC				
SPRING RIVER CHRISTIAN VILLAG	E, INC	Talank	(417) (22, 4212	A 1-1	N.T.
201 S NORTHPARK LN	MO (4901 942)	Telephone	(417) 623-4313	Alzheimer's Unit	No
	MO 64801-8426	Level of Care:	SNF	Bed Capacity	120
Mailing Address 201 S NORTHPARK L	N	County JAS	PER	DMH Licensed	No

Region 1

Medicare/Medicaid

Facility Number

14251

MO 64801-8426

JOPLIN

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SPRING VALLEY ASSISTED LIVING	;			
2915 SOUTH FREMONT AVE		Telephone (417) 883-4022	Alzheimer's Unit	No
SPRINGFIELD	MO 65804-3608	Level of Care: ALF	Bed Capacity	40
Mailing Address 2915 SOOUTH FREMO	ONT AVE	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65804-3608	Region 1	Facility Number	00144
SPRING VALLEY HEALTH & REHA	RII ITATION CENTED			
2915 SOUTH FREMONT AVE	BILITATION CENTER	Telephone (417) 883-4022	Alzheimer's Unit	Yes
	MO 65804-3608	Level of Care: SNF	Bed Capacity	194
Mailing Address 2915 SOUTH FREMON		County GREENE	DMH Licensed	No
	MO 65804-3608		Facility Number	00144
SI KINGI IELD	WIO 03004-3000	Region 1 Medicare/Medicaid	Facility Number	00144
CDDINGERED D DEVIA DIL ITTATIONI O	HEALTH CARE CENTER			
SPRINGFIELD REHABILITATION &	HEALTH CAKE CENTER	Tolonhono (417) 992 0025	Alzhoimaria II-it	Me
2800 S FORT AVE	MO (5907 2490	Telephone (417) 882-0035	Alzheimer's Unit	No
	MO 65807-3480	Level of Care: SNF	Bed Capacity	146
Mailing Address PO BOX 3438 GS	140, 65000 2420	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65808-3438	Region 1 Medicare/Medicaid	Facility Number	07460
SPRINGFIELD SKILLED CARE CEN	TER			
2401 W GRAND ST		Telephone (417) 864-4545	Alzheimer's Unit	No
	MO 65802-4967	Level of Care: SNF	Bed Capacity	120
Mailing Address 2401 W GRAND ST		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-4967	Region 1 Medicare/Medicaid	Facility Number	09756
SPRINGFIELD VILLA				
1100 EAST MONTCLAIR		Telephone (417) 820-8500	Alzheimer's Unit	Yes
	MO 65807-5076	Level of Care: SNF	Bed Capacity	146
Mailing Address 1100 EAST MONTCLA		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-5076	Region 1 Medicare/Medicaid	Facility Number	05280
	-			
SPRINGHOUSE VILLAGE EAST, LLC	c			
3877 EAST FARM ROAD 132		Telephone (417) 877-1717	Alzheimer's Unit	Yes
	MO 65802-	Level of Care: ALF**	Bed Capacity	100
Mailing Address 3877 EAST FARM RO.		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-	Region 1	Facility Number	32469
GGTD A D X X G				
SSTAR LLC				
125 ANNA AVE, #18		Telephone (636) 462-6979	Alzheimer's Unit	No
	MO 63379-2402	Level of Care: RCF	Bed Capacity	20
Mailing Address 125 ANNA AVE, #18		County LINCOLN	DMH Licensed	Yes
TROY	MO 63379-2402	Region 5	Facility Number	16992
OTE A CANEG HOME				
ST AGNES HOME		T-1	A 1-1	N.T.
10341 MANCHESTER RD	MO (2122 1520	Telephone (314) 965-7616	Alzheimer's Unit	No
KIRKWOOD	MO 63122-1520	Level of Care: ICF	Bed Capacity	150
Mailing Address 10341 MANCHESTER	. KD	County SAINT LOUIS COUNTY	DMH Licensed	No

Region 7

Facility Number

07481

MO 63122-1520

KIRKWOOD

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ST ANDREW'S ASSISTED LIVING	OF BRIDGETON			
11325 ST CHARLES ROCK RD		Telephone (314) 209-1177	Alzheimer's Unit	No
BRIDGETON	MO 63044-2722	Level of Care: ALF**	Bed Capacity	35
Mailing Address 11325 ST CHARLES	ROCK RD	County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON	MO 63044-2722	Region 7	Facility Number	22810
ST ANDREW'S AT FRANCIS PLAC	Œ			
400 SUMMERVILLE BLVD	2	Telephone (636) 938-5151	Alzheimer's Unit	No
EUREKA	MO 63025-2316	Level of Care: SNF	Bed Capacity	106
Mailing Address 400 SUMMERVILLE		County SAINT LOUIS COUNTY	DMH Licensed	No
EUREKA	MO 63025-2316	Region 7 Medicare/Medicaid	Facility Number	06430
2010111	115 05020 2010	region / Withteat Civitate and	Tuelley Tulliber	00430
ST ANDREW'S AT NEW FLORENC	Œ	T-l-nh (572) 415 0222	Allahadaan 1 TT 14	N.T.
515 PICNIC ST	NO. 62262 2222	Telephone (573) 415-9333	Alzheimer's Unit	No
NEW FLORENCE	MO 63363-2223	Level of Care: RCF*	Bed Capacity	33
Mailing Address 515 PICNIC ST	NO. 62262 2222	County MONTGOMERY	DMH Licensed	No
NEW FLORENCE	MO 63363-2223	Region 6	Facility Number	05723
ST ANDREW'S AT NEW FLORENCE	Œ			
515 PICNIC ST		Telephone (573) 415-9333	Alzheimer's Unit	No
NEW FLORENCE	MO 63363-2223	Level of Care: SNF	Bed Capacity	87
Mailing Address 515 PICNIC ST		County MONTGOMERY	DMH Licensed	No
NEW FLORENCE	MO 63363-2223	Region 6 Medicare/Medicaid	Facility Number	05723
ST ANN ASSISTED LIVING CENTE	ER			
10441 INTERNATIONAL PLAZA DR		Telephone (314) 423-1254	Alzheimer's Unit	No
SAINT ANN	MO 63074-1805	Level of Care: ALF	Bed Capacity	40
Mailing Address 10441 INTERNATIO	NAL PLAZA DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT ANN	MO 63074-1805	Region 7	Facility Number	21994
ST ANTHONY'S				
1010 EAST 68TH STREET		Telephone (816) 846-0870	Alzheimer's Unit	Yes
KANSAS CITY	MO 64131-	Level of Care: ALF**	Bed Capacity	81
Mailing Address 1010 EAST 68TH ST	REET	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64131-	Region 3	Facility Number	32075
ST CLAIR NURSING CENTER				
1035 PLAZA COURT NORTH		Telephone (636) 629-2100	Alzheimer's Unit	No
SAINT CLAIR	MO 63077-1129	Level of Care: SNF	Bed Capacity	79
Mailing Address 1035 PLAZA CT NO	RTH	County FRANKLIN	DMH Licensed	No
SAINT CLAIR	MO 63077-1129	Region 6 Medicare/Medicaid	Facility Number	13744
ST ELIZABETH CARE CENTER				
649 SOUTH WALNUT ST		Telephone (573) 493-2215	Alzheimer's Unit	No
SAINT ELIZABETH	MO 65075-2440	Level of Care: SNF	Bed Capacity	63
Mailing Address 649 SOUTH WALNU	JT ST	County MILLER	DMH Licensed	No
SAINT ELIZABETH	MO 65075-2440	Region 6 Medicare/Medicaid	Facility Number	07523

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ST ELIZABETH HALL			
325 NORTH NEWSTEAD AVE		Telephone (314) 652-9525	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2707	Level of Care: ALF**	Bed Capacity 50
Mailing Address 325 N NEWSTEAD A		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63108-2707	Region 7	Facility Number 07516
ST FRANCIS PARK - ASSISTED LIV	ING BY AMERICARE		
1806 SAINT FRANCIS ST		Telephone (573) 888-1188	Alzheimer's Unit No
KENNETT	MO 63857-1568	Level of Care: ALF**	Bed Capacity 50
Mailing Address PO BOX 629		County DUNKLIN	DMH Licensed No
KENNETT	MO 63857-0629	Region 2	Facility Number 18903
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		Telephone (573) 760-1700	Alzheimer's Unit No
FARMINGTON	MO 63640-3428	Level of Care: RCF	Bed Capacity 11
Mailing Address 1180 OLD JACKSON		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-3428	Region 2	Facility Number 21512
TARMINOTON	WIO 03040-3426	Kegion 2	racinty Number 21312
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		Telephone (573) 760-1700	Alzheimer's Unit No
FARMINGTON	MO 63640-3428	Level of Care: RCF*	Bed Capacity 29
Mailing Address 1180 OLD JACKSON	RD	County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-3428	Region 2	Facility Number 21512
		S	·
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		Telephone (573) 760-1700	Alzheimer's Unit No
FARMINGTON	MO 63640-3428	Level of Care: SNF	Bed Capacity 118
Mailing Address 1180 OLD JACKSON	RD	County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-3428	Region 2 Medicare/Medicaid	Facility Number 21512
CT CENTENTENE CADE CENTEED IN	a		
ST GENEVIEVE CARE CENTER, INC 1010 STE GENEVIEVE DR	C	Talanhana (572) 992 5725	Alzheimer's Unit No
SAINTE GENEVIEVE	MO 63670-1447	Telephone (573) 883-5725 Level of Care: SNF	
	WO 03070-1447		
Mailing Address PO BOX 426 SAINTE GENEVIEVE	MO 63670-0426	County SAINTE GENEVIEVE	DMH Licensed No Facility Number 03254
SAINTE GENEVIEVE	WIO 03070-0420	Region 2 Medicare/Medicaid	Facility Number 03234
ST JAMES LIVING CENTER			
415 SIDNEY ST		Telephone (573) 265-8921	Alzheimer's Unit Yes
SAINT JAMES	MO 65559-1070	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 69		County PHELPS	DMH Licensed No
SAINT JAMES	MO 65559-0069	Region 6 Medicare/Medicaid	Facility Number 05238
		g	•
ST JOE MANOR			
10 LAKE DR		Telephone (573) 358-2800	Alzheimer's Unit Yes
BONNE TERRE	MO 63628-1820	Level of Care: ALF	Bed Capacity 10
Mailing Address 10 LAKE DR		County SAINT FRANCOIS	DMH Licensed No
BONNE TERRE	MO 63628-1820	Region 2	Facility Number 22664

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ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE	MO 63628-1820 MO 63628-1820	Telephone (573) 358-2800 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 145 No 22664
ST JOE MANOR 10 LAKE DR BONNE TERRE Mailing Address 10 LAKE DR BONNE TERRE	MO 63628-1820 MO 63628-1820	Telephone (573) 358-2800 Level of Care: ALF** County SAINT FRANCOIS Region 2	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 No 22664
ST JOHNS PLACE 3333 BROWN ROAD SAINT LOUIS Mailing Address 3333 BROWN RD SAINT LOUIS	MO 63114-4327 MO 63114-4327	Telephone (314) 426-2211 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 94 No 18454
ST JOSEPH 3002 N 18TH ST SAINT JOSEPH Mailing Address 3002 N 18TH ST SAINT JOSEPH	MO 64505-1872 MO 64505-1872	Telephone (816) 364-4200 Level of Care: SNF County BUCHANAN Region 4 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 180 No 08000
ST JOSEPH CHATEAU 811 NORTH 9TH ST SAINT JOSEPH Mailing Address 811 NORTH 9TH ST SAINT JOSEPH	MO 64501-1651 MO 64508-1651	Telephone (816) 233-5164 Level of Care: SNF County BUCHANAN Region 4 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 69 No 07532
ST JOSEPH SENIOR LIVING 1317 NORTH 36TH ST SAINT JOSEPH Mailing Address 1317 N 36TH ST SAINT JOSEPH	MO 64506-2359 MO 64506-2359	Telephone (816) 676-1630 Level of Care: SNF County BUCHANAN Region 4 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 110 No 00526
ST LOUIS ALTENHEIM 5408 SOUTH BROADWAY SAINT LOUIS Mailing Address 5408 SOUTH BROAD SAINT LOUIS	MO 63111-2023 DWAY MO 63111-2023	Telephone (314) 353-7225 Level of Care: ALF** County SAINT LOUIS CITY Region 7	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	Yes 23 No 07585
ST LOUIS ALTENHEIM 5408 SOUTH BROADWAY SAINT LOUIS Mailing Address 5408 SOUTH BROAD SAINT LOUIS	MO 63111-2023 DWAY MO 63111-2023	Telephone (314) 353-7225 Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 24 No 07585

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ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY	Telephone	(314) 353-7225	Alzheimer's Unit	No
SAINT LOUIS MO 6311	11-2023 Level of Care:	ICF	Bed Capacity	24
Mailing Address 5408 S BROADWAY	County SA	AINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 6311	11-2023 Region 7		Facility Number	07585
ST LOUIS HILLS ASSISTED LIVING AND ME	MORY CARE			
6543 CHIPPEWA ST	Telephone	(314) 647-6600	Alzheimer's Unit	Yes
SAINT LOUIS MO 6310			Bed Capacity	181
Mailing Address 6543 CHIPPEWA ST		AINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 6310		mvi Locio eri i	Facility Number	07594
SAINT EGGES MG GSTC	Kegion /		racinty (valide)	07374
ST LOUIS PLACE HEALTH & REHABILITAT	ION			
2600 REDMAN RD	Telephone	(314) 355-8585	Alzheimer's Unit	No
SAINT LOUIS MO 6313	36-5863 Level of Care:	SNF	Bed Capacity	120
Mailing Address 2600 REDMAN RD	County SA	AINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 6313	Region 7	Medicare/Medicaid	Facility Number	18697
ST LUKE'S CARE CENTER, INC				
1220 EAST FAIRVIEW AVE	Telephone	(417) 358-9084	Alzheimer's Unit	No
CARTHAGE MO 6483	•		Bed Capacity	41
Mailing Address 1220 EAST FAIRVIEW AVE		SPER	DMH Licensed	No
CARTHAGE MO 6483	• • • • •		Facility Number	07606
	8			
ST LUKE'S NURSING CENTER, INC				
1220 EAST FAIRVIEW AVE	Telephone	(417) 358-9084	Alzheimer's Unit	Yes
CARTHAGE MO 6483			Bed Capacity	95
Mailing Address 1220 EAST FAIRVIEW AVE	•	SPER	DMH Licensed	No
CARTHAGE MO 6483	Region 1	Medicare/Medicaid	Facility Number	07606
ST PETERS MANOR CARE CENTER				
230 SPENCER RD	Telephone	(636) 441-2750	Alzheimer's Unit	NO
SAINT PETERS MO 6337	76-2425 Level of Care:	SNF	Bed Capacity	96
Mailing Address 230 SPENCER RD	County SA	AINT CHARLES	DMH Licensed	No
SAINT PETERS MO 6337	76-2425 Region 5	Medicare/Medicaid	Facility Number	07613
ST SOPHIA HEALTH & REHABILITATION C	FNTFD			
936 CHARBONIER RD	Telephone	(314) 831-4800	Alzheimer's Unit	No
	-			
FLORISSANT MO 6303		SNF AINT LOUIS COUNTY	Bed Capacity DMH Licensed	240 No.
Mailing Address 936 CHARBONIER RD				No
FLORISSANT MO 6303	31-5220 Region 7	Medicare/Medicaid	Facility Number	07631
STEELVILLE SENIOR LIVING				
311 NORTH SPRING ST	Telephone	(573) 260-8850	Alzheimer's Unit	No
STEELVILLE MO 6556	55-5089 Level of Care:	SNF	Bed Capacity	72
Mailing Address 311 NORTH SPRING ST	County CI	RAWFORD	DMH Licensed	No
STEELVILLE MO 6556	Region 6	Medicare/Medicaid	Facility Number	02860

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STEELVILLE SENIOR LIVING			
311 NORTH SPRING ST		Telephone (573) 260-8850	Alzheimer's Unit No
STEELVILLE	MO 65565-5089	Level of Care: ALF	Bed Capacity 21
Mailing Address 311 NORTH SPRING		County CRAWFORD	DMH Licensed No
STEELVILLE	MO 65565-5089	Region 6	Facility Number 02860
STBEET IEEE	110 03303 3007	Region	ruemey number 02000
STONEBRIDGE ADAMS STREET			
1024 ADAMS ST		Telephone (573) 635-1320	Alzheimer's Unit No
JEFFERSON CITY	MO 65101-3408	Level of Care: SNF	Bed Capacity 120
Mailing Address 1024 ADAMS ST		County COLE	DMH Licensed No
JEFFERSON CITY	MO 65101-3408	Region 6 Medicare/Medicaid	Facility Number 01339
STONEBRIDGE CHILLICOTHE			
2601 FAIR ST		Telephone (660) 646-4123	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3525	Level of Care: SNF	Bed Capacity 75
Mailing Address 2601 FAIR ST		County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3525	Region 4 Medicare/Medicaid	Facility Number 03833
STONEBRIDGE CHILLICOTHE			
2601 FAIR ST		Telephone (660) 646-4123	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3525	Level of Care: RCF*	Bed Capacity 40
Mailing Address 2601 FAIR ST	1120 01001 2020	County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3525	Region 4	Facility Number 03833
		Region	ruemey number 03033
STONEBRIDGE DESOTO			
1550 VILLAS DR		Telephone (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: SNF	Bed Capacity 56
Mailing Address 1550 VILLAS DR		County JEFFERSON	DMH Licensed No
DE SOTO	MO 63020-2586	Region 2 Medicare/Medicaid	Facility Number 13501
STONEBRIDGE DESOTO			
1550 VILLAS DR		Telephone (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: RCF*	Bed Capacity 80
Mailing Address 1550 VILLAS DR		County JEFFERSON	DMH Licensed No
DE SOTO	MO 63020-2586	Region 2	Facility Number 13501
STONEBRIDGE FLORISSANT			
6768 NORTH HIGHWAY 67		Telephone (314) 741-9101	Alzheimer's Unit No
FLORISSANT	MO 63034-2742	Level of Care: SNF	Bed Capacity 120
Mailing Address 6768 NORTH HWY	67	County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63034-2742	Region 7 Medicare/Medicaid	Facility Number 14200
STONEBRIDGE HERMANN			
1800 WEIN ST		Telephone (573) 486-3155	Alzheimer's Unit No
HERMANN	MO 65041-1601	Level of Care: SNF	Bed Capacity 118
Mailing Address PO BOX 468		County GASCONADE	DMH Licensed No
HERMANN	MO 65041-0468	Region 6 Medicare/Medicaid	Facility Number 02690

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CTONEDDIDGE HEDMANN					
STONEBRIDGE HERMANN 1800 WEIN ST		Telephone	(573) 486-3155	Alzheimer's Unit	No
	O 65041-1601	Level of Care:	(373) 480-3133 ALF	Bed Capacity	18
Mailing Address PO BOX 468	9 03041-1001		SCONADE	DMH Licensed	No
0	0 65041-0468	Region 6	SCONADL	Facility Number	02690
TIERIM INTO	0.0041 0400	Region 0		Tachicy Number	02070
STONEBRIDGE LAKE OZARK					
872 COLLEGE BLVD		Telephone	(573) 302-0900	Alzheimer's Unit	No
OSAGE BEACH MC	O 65065-8408	Level of Care:	SNF	Bed Capacity	66
Mailing Address 872 COLLEGE BLVD		County MII	LLER	DMH Licensed	No
_	O 65065-8408	Region 6	Medicare/Medicaid	Facility Number	20926
STONEBRIDGE LAKE OZARK		m	(552) 202 0000		
872 COLLEGE BLVD		Telephone	(573) 302-0900	Alzheimer's Unit	No
	0 65065-8408	Level of Care:	RCF*	Bed Capacity	40
Mailing Address 872 COLLEGE BLVD	2 (50(5,040)	•	LLER	DMH Licensed	No
OSAGE BEACH MC	O 65065-8408	Region 6		Facility Number	20926
STONEBRIDGE MARBLE HILL					
702 HIGHWAY 34 WEST		Telephone	(573) 238-2614	Alzheimer's Unit	No
	O 63764-4301	Level of Care:	SNF	Bed Capacity	98
Mailing Address 702 HWY 34 WEST			LLINGER	DMH Licensed	No
_	O 63764-4301		Medicare/Medicaid	Facility Number	10864
		11081711	vicureur o ricureura		10001
STONEBRIDGE MARYLAND HEIGHTS					
2963 DODDRIDGE AVE		Telephone	(314) 291-4557	Alzheimer's Unit	No
MARYLAND HEIGHTS MC	O 63043-1736	Level of Care:	SNF	Bed Capacity	223
Mailing Address 2963 DODDRIDGE AVE		•	INT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS MC	O 63043-1736	Region 7	Medicare/Medicaid	Facility Number	00855
STONEBRIDGE OAK TREE					
3108 WEST TRUMAN BLVD		Telephone	(573) 893-3063	Alzheimer's Unit	No
	O 65109-4918	Level of Care:	ALF	Bed Capacity	80
Mailing Address 3108 WEST TRUMAN BL	.VD	County CO	LE	DMH Licensed	No
	O 65109-4918	Region 6		Facility Number	10300
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
STONEBRIDGE OAK TREE					
3108 WEST TRUMAN BLVD		Telephone	(573) 893-3063	Alzheimer's Unit	No
	O 65109-4918	Level of Care:	SNF	Bed Capacity	42
Mailing Address 3108 WEST TRUMAN BL		County CO	LE	DMH Licensed	No
JEFFERSON CITY MC	O 65109-4918	Region 6	Medicare	Facility Number	10300
STONEBRIDGE OWENSVILLE					
1016 W HIGHWAY 28		Telephone	(573) 437-6877	Alzheimer's Unit	Yes
	O 65066-1677	Level of Care:	SNF	Bed Capacity	131
Mailing Address PO BOX 593		County GA	SCONADE	DMH Licensed	No
OWENSVILLE MC	0 65066-0593	Region 6	Medicare/Medicaid	Facility Number	19051

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STONEBRIDGE VILLA MARIE 1030 EDMONDS ST JEFFERSON CITY	MO 65109-5213	<b>Telephone</b> (573) 635-3381 <b>Level of Care:</b> SNF	Alzheimer's Unit Yes Bed Capacity 120
Mailing Address 1030 EDMONDS ST JEFFERSON CITY	MO 65109-5213	County COLE  Region 6 Medicare/Medicaid	DMH LicensedNoFacility Number08282
STONEBRIDGE WESTPHALIA			
1899 HIGHWAY 63		<b>Telephone</b> (573) 455-2280	Alzheimer's Unit No
WESTPHALIA	MO 65085-2215	Level of Care: RCF*	Bed Capacity 28
Mailing Address 1899 HWY 63 WESTPHALIA	MO 65085-2215	County OSAGE Region 6	DMH Licensed No Facility Number 18653
STONEBRIDGE WESTPHALIA			,
1899 HIGHWAY 63		<b>Telephone</b> (573) 455-2280	Alzheimer's Unit No
WESTPHALIA	MO 65085-2215	Level of Care: SNF	<b>Bed Capacity</b> 64
Mailing Address 1899 HWY 63		County OSAGE	<b>DMH Licensed</b> No
WESTPHALIA	MO 65085-2215	Region 6 Medicare/Medicaid	Facility Number 18653
STONECREST HEALTHCARE			
2 HIGHWAY Y		<b>Telephone</b> (573) 244-3171	Alzheimer's Unit No
VIBURNUM	MO 65566-0707	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address PO BOX 707		County IRON	DMH Licensed No
VIBURNUM	MO 65566-0707	Region 2 Medicare/Medicaid	Facility Number 16689
STONEY RIDGE VILLAGE			
25023 BOTHWELL PARK RD		<b>Telephone</b> (660) 827-3993	Alzheimer's Unit No
SEDALIA	MO 65301-0084	Level of Care: RCF	Bed Capacity 81
Mailing Address 25023 BOTHWELL I	PARK RD	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-0084	Region 6	Facility Number 05035
STOVER'S RESIDENTIAL CARE F.	ACILITY		
520 EAST 5TH ST		<b>Telephone</b> (660) 265-3262	Alzheimer's Unit No
MILAN	MO 63556-1222	Level of Care: RCF	Bed Capacity 20
Mailing Address 520 EAST 5TH ST		County SULLIVAN	<b>DMH Licensed</b> Yes
MILAN	MO 63556-1222	Region 5	Facility Number 07709
STRAFFORD CARE CENTER			
505 WEST EVERGREEN		<b>Telephone</b> (417) 736-9332	Alzheimer's Unit Yes
STRAFFORD	MO 65757-8625	Level of Care: SNF	Bed Capacity 78
Mailing Address 505 WEST EVERGR	EEN	County GREENE	DMH Licensed No
STRAFFORD	MO 65757-8625	Region 1 Medicare/Medicaid	Facility Number 21285
STUART HOUSE, LLC THE			
117 S HICKMAN		<b>Telephone</b> (573) 682-3204	Alzheimer's Unit No
CENTRALIA	MO 65240-1316	Level of Care: ICF	Bed Capacity 27
Mailing Address 117 S HICKMAN		County BOONE	<b>DMH Licensed</b> No
CENTRALIA	MO 65240-1316	Region 6	Facility Number 10146

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STUBBLEFIELD RETIREMENT HO	OME		
5349 HIGHWAY P		<b>Telephone</b> (573) 885-3661	Alzheimer's Unit No
CUBA	MO 65453-6281	Level of Care: RCF*	<b>Bed Capacity</b> 34
Mailing Address PO BOX 647		County CRAWFORD	DMH Licensed Yes
CUBA	MO 65453-0647	Region 6	Facility Number 17894
CONTROL DEGINERAL CARE			
STURGEON RESIDENTIAL CARE 315 E STONE ST		T-l (572) 697 2012	Al-beimente Tinia No
	MO 65294 9007	<b>Telephone</b> (573) 687-3012	Alzheimer's Unit No
STURGEON  A III DO BOY 228	MO 65284-8907	Level of Care: RCF	Bed Capacity 20
Mailing Address PO BOX 328	MO 65294 0229	County BOONE	DMH Licensed No
STURGEON	MO 65284-0328	Region 6	Facility Number 07733
SUGAR CREEK - ASSISTED LIVING	G BY AMERICARE		
161 PROFESSIONAL PARKWAY	0 D 1 1211 221 12 12 12 12 12 12 12 12 12 1	<b>Telephone</b> (636) 528-3136	Alzheimer's Unit Yes
TROY	MO 63379-2829	Level of Care: ALF**	Bed Capacity 60
Mailing Address 161 PROFESSIONAL		County LINCOLN	DMH Licensed No
TROY	MO 63379-2829	Region 5	Facility Number 26349
	MO 03317 2027	Region 5	ruenty rumser 2004)
SUMMIT VILLA LIFECARE			
229 KAREN DR		<b>Telephone</b> (573) 896-8567	Alzheimer's Unit Yes
HOLTS SUMMIT	MO 65043-2522	Level of Care: ALF**	<b>Bed Capacity</b> 50
Mailing Address 229 KAREN DR		County CALLAWAY	DMH Licensed No
HOLTS SUMMIT	MO 65043-2522	Region 6	Facility Number 21318
SUMMIT, THE			
3660 SUMMIT		<b>Telephone</b> (816) 931-1196	Alzheimer's Unit No
KANSAS CITY	MO 64111-4632	Level of Care: SNF	<b>Bed Capacity</b> 64
Mailing Address 3660 SUMMIT		County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64111-4632	Region 3 Medicare/Medicaid	Facility Number 18330
SUMMITVIEW TERRACE ASSISTE	ED LIVING BY AMERICARE		
12101 EAST BANNISTER RD		<b>Telephone</b> (816) 763-6667	Alzheimer's Unit No
KANSAS CITY	MO 64138-4913	Level of Care: ALF**	<b>Bed Capacity</b> 52
Mailing Address 12101 EAST BANNE	STER RD	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64138-4913	Region 3	Facility Number 16311
			•
SUNNY MEADOWS LIVING CENTI	ER		
419 NORTH PROSPECT AVE		<b>Telephone</b> (660) 826-5353	Alzheimer's Unit No
SEDALIA	MO 65301-2729	Level of Care: RCF	Bed Capacity 12
Mailing Address 419 N PROSPECT A		County PETTIS	<b>DMH Licensed</b> Yes
SEDALIA	MO 65301-2729	Region 6	Facility Number 06527
SUNNYHILL INDEPENDENCE CEN	VTER		
3343 ARMBRUSTER ROAD	. – – – –	<b>Telephone</b> (636) 586-2188	Alzheimer's Unit No
DE SOTO	MO 63020-4506	Level of Care: ALF**	Bed Capacity 32
Mailing Address 3343 ARMBRUSTER		County JEFFERSON	DMH Licensed Yes
DE SOTO	MO 63020-4506	Region 2	Facility Number 29674
			27014

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SUNNYHILL RESIDENTIAL CARE	FACILITY		
134 GRAY ST		<b>Telephone</b> (636) 931-4701	Alzheimer's Unit No
FESTUS	MO 63028-1949	Level of Care: RCF	Bed Capacity 20
Mailing Address PO BOX 356		County JEFFERSON	DMH Licensed Yes
FESTUS	MO 63028-0356	Region 2	Facility Number 07725
CHANNAHII I C DECIDENTIAL CAD	E EACH UTV		
SUNNYHILLS RESIDENTIAL CAR 17562 IMPERIAL RD	E FACILITY	<b>Telephone</b> (417) 358-6122	Alzheimer's Unit No
CARTHAGE	MO 64836-8753	Telephone (417) 358-6122 Level of Care: RCF	
Mailing Address 17562 IMPERIAL RI			Bed Capacity 18  DMH Licensed No
CARTHAGE	MO 64836-8753		
CARTHAGE	WO 04830-8733	Region 1	Facility Number 13351
SUNNYVIEW NURSING HOME & A	APARTMENTS		
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit No
TRENTON	MO 64683-1103	Level of Care: RCF*	<b>Bed Capacity</b> 38
Mailing Address 1311 EAST 28TH ST		County GRUNDY	<b>DMH Licensed</b> No
TRENTON	MO 64683-1103	Region 4	Facility Number 18509
SUNNYVIEW NURSING HOME & A	APARTMENTS		
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit No
TRENTON	MO 64683-1103	Level of Care: SNF	Bed Capacity 154
Mailing Address 1311 EAST 28TH ST		County GRUNDY	DMH Licensed No
TRENTON	MO 64683-1103	Region 4 Medicare/Medicaid	Facility Number 18509
		induction of the content of the cont	10009
SUNRISE OF CHESTERFIELD			
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit No
CHESTERFIELD	MO 63017-5000	Level of Care: ALF**	<b>Bed Capacity</b> 3
Mailing Address 1880 CLARKSON R		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-5000	Region 7	Facility Number 23767
SUNRISE OF CHESTERFIELD			
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit Yes
CHESTERFIELD	MO 63017-5000	Level of Care: ICF	<b>Bed Capacity</b> 95
Mailing Address 1880 CLARKSON R	D	County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-5000	Region 7	Facility Number 23767
CUMPICE OF DEC DEDEC			
SUNRISE OF DES PERES		(214) 0.65 2000	
13460 MANCHESTER RD	MO (2121 1724	<b>Telephone</b> (314) 965-3800	Alzheimer's Unit Yes
DES PERES	MO 63131-1734	Level of Care: ICF	Bed Capacity 102
Mailing Address 13460 MANCHESTE		County SAINT LOUIS COUNTY	DMH Licensed No
DES PERES	MO 63131-1734	Region 7	Facility Number 24242
SUNRISE OF WEBSTER GROVES			
45 EAST LOCKWOOD		<b>Telephone</b> (314) 918-7300	Alzheimer's Unit Yes
SAINT LOUIS	MO 63119-3050	Level of Care: ALF**	<b>Bed Capacity</b> 90
Mailing Address 45 EAST LOCKWOO	OD	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63119-3050	Region 7	Facility Number 28242

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SUNSET HEALTH CARE CENTER	The second of th	
400 WEST PARK AVE	•	No
UNION MO 63084-1		20
Mailing Address 400 WEST PARK AVE UNION MO 63084-1	·	No 21
UNION MO 63084-1	140 Region 6 Medicare/Medicaid Facility Number 078.	31
SUNSET HOME		
1201 SOUTH POLK	Telephone (816) 449-2158 Alzheimer's Unit	No
MAYSVILLE MO 64469-4		60
Mailing Address 1201 S POLK		No
MAYSVILLE MO 64469-4	·	98
SUNSHINE ACRES		_
541 ROCK ROAD	•	No
BOURBON MO 65441-6		20
Mailing Address PO BOX 67	·	es
BOURBON MO 65441-0	067 Region 6 Facility Number 035	40
SUNSHINE HOME CARE - WINFIELD		
499 WALNUT ST	Telephone (636) 668-8500 Alzheimer's Unit	No
WINFIELD MO 63389-1	138 Level of Care: RCF Bed Capacity	49
Mailing Address PO BOX 185	County LINCOLN DMH Licensed Y	es
WINFIELD MO 63389-0	185 Region 5 Facility Number 252	66
SUNSHINE VILLA		
2520 JAMES ST	Telephone (573) 264-2424 Alzheimer's Unit	No
SCOTT CITY MO 63780-1	•	26
Mailing Address 2520 JAMES ST		zes zes
SCOTT CITY MO 63780-1	•	
SUNTERRA SPRINGS DARDENNE PRAIRIE		
7275 STATE HIGHWAY N	•	No
DARDENNE PRAIRIE MO 63368-7 Mailing Address 7275 STATE HIGHWAY N	1 0	38 No
DARDENNE PRAIRIE MO 63368-7		
DANDENNE FRAIRIE MO 03306-7	128 Region 5 Medicare Facility Number 323.	31
SUNTERRA SPRINGS INDEPENDENCE		
19200 E 37TH TERRACE S	Telephone (816) 335-3008 Alzheimer's Unit	No
INDEPENDENCE MO 64057-8	324 Level of Care: SNF Bed Capacity	38
Mailing Address 19200 E 37TH TERRACE S	County JACKSON DMH Licensed	No
INDEPENDENCE MO 64057-8	Region 3 Medicare Facility Number 308	94
SUNTERRA SPRINGS SPRINGFIELD		
4935 S NATIONAL AVE	Telephone (417) 720-8050 Alzheimer's Unit	No
SPRINGFIELD MO 65810-2		38
Mailing Address 4935 S NATIONAL AVE	• •	No
SPRINGFIELD MO 65810-2	989 Region 1 Medicare Facility Number 312	73

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CUBERIOR MANOR OF ROWNTON	IN LLC		
SUPERIOR MANOR OF DOWNTOV	WN, LLC	Tolonhous (214) 021 2625	Alzheimer's Unit No
1501 CLINTON STREET	MO (210) 4100	<b>Telephone</b> (314) 921-2625	
SAINT LOUIS	MO 63106-4100	Level of Care: RCF	Bed Capacity 40
Mailing Address 1501 CLINTON STR		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63106-4100	Region 7	Facility Number 30136
CUREDIOD MANOR OF FECTURE A	1.0		
SUPERIOR MANOR OF FESTUS, LI	LC	m. 1 (214) 524 5575	
12827 HIGHWAY TT		<b>Telephone</b> (314) 624-5575	Alzheimer's Unit No
FESTUS	MO 63028-4351	Level of Care: SNF	<b>Bed Capacity</b> 55
Mailing Address 12827 HWY TT		County JEFFERSON	<b>DMH Licensed</b> No
FESTUS	MO 63028-4351	Region 2 Medicare/Medicaid	Facility Number 06820
SURREY PLACE ST LUKE'S HOSP	ITAL CELLLED MUDEING		
14701 OLIVE BLVD	ITAL SKILLED NORSING	<b>Telephone</b> (314) 542-3300	Alzheimer's Unit Yes
CHESTERFIELD	MO 63017-2221	Level of Care: SNF	Bed Capacity 130
			• •
Mailing Address 14701 OLIVE BLVD		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-2221	Region 7 Medicare/Medicaid	Facility Number 15467
SWEET SPRINGS VILLA			
518 E MARSHALL		<b>Telephone</b> (660) 335-6391	Alzheimer's Unit No
SWEET SPRINGS	MO 65351-9756	Level of Care: SNF	Bed Capacity 120
Mailing Address 518 E MARSHALL	110 03331 7730	County SALINE	DMH Licensed No
SWEET SPRINGS	MO 65351-9756	0.00000	
SWEET SPRINGS	WO 03331-9730	Region 5 Medicare/Medicaid	Facility Number 05378
SWIFT CREEK RESIDENTIAL CAR	RE CENTER		
1673 HIGHWAY 53		<b>Telephone</b> (573) 776-6501	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4132	Level of Care: RCF*	<b>Bed Capacity</b> 12
Mailing Address 1673 HIGHWAY 53		County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-4132	Region 2	Facility Number 20386
SWITZER RESIDENTIAL CARE			
3260 MYSTIC LANE		<b>Telephone</b> (573) 785-9399	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-3067	Level of Care: RCF*	Bed Capacity 20
Mailing Address 3260 MYSTIC LANE		County BUTLER	<b>DMH Licensed</b> Yes
POPLAR BLUFF	MO 63901-3067	Region 2	Facility Number 20739
SYLVAN HOUSE			
30 SHERMAN RD		<b>Telephone</b> (314) 892-2212	Alzheimer's Unit No
SAINT LOUIS	MO 63125-4125	Level of Care: RCF	Bed Capacity 40
	141O U3123-4123		
Mailing Address 30 SHERMAN RD	MO 62125 4125		
SAINT LOUIS	MO 63125-4125	Region 7	Facility Number 15078
SYLVIA G THOMPSON RESIDENC	E CENTER, INC		
3333 WEST TENTH ST		<b>Telephone</b> (660) 826-2118	Alzheimer's Unit Yes
SEDALIA	MO 65301-2113	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 3333 WEST TENTH	ST	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-2113	Region 6 Medicaid	Facility Number 17278
			-,2,0

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TARKIO REHABILITATION & HE.	ALTH CARE	T. L. J. (600) 726 4116	ALL TO THE STATE OF THE STATE O
300 CEDAR ST	MO (4401 1174	<b>Telephone</b> (660) 736-4116	Alzheimer's Unit No
TARKIO	MO 64491-1174	Level of Care: SNF	Bed Capacity 95
Mailing Address 300 CEDAR ST TARKIO	MO (4401 1174	County ATCHISON	DMH Licensed No
TARKIO	MO 64491-1174	Region 4 Medicare/Medicaid	Facility Number 00494
TEAL LAKE - ASSISTED LIVING B	Y AMERICARE		
1722 HUNTINGFIELD DR		<b>Telephone</b> (573) 582-7800	Alzheimer's Unit No
MEXICO	MO 65265-3808	Level of Care: ALF**	Bed Capacity 42
Mailing Address 1722 HUNTINGFIEL		County AUDRAIN	DMH Licensed No
MEXICO	MO 65265-3808	Region 5	Facility Number 23534
		region -	23331
TESSLAND RESIDENTIAL CARE F	FACILITY LLC		
24583 HIGHWAY 5		<b>Telephone</b> (660) 265-4391	Alzheimer's Unit No
MILAN	MO 63556-2809	Level of Care: RCF	<b>Bed Capacity</b> 9
Mailing Address 24583 HWY 5		County SULLIVAN	DMH Licensed Yes
MILAN	MO 63556-2809	Region 5	Facility Number 19990
THE ORANGE AT CONTOURS			
THE GRANDE AT CHESTERFIELD	)	m 1 1 (62 c) 770 4000	
16300 JUSTUS POST ROAD	NO 62017 4600	<b>Telephone</b> (636) 778-4800	Alzheimer's Unit Yes
CHESTERFIELD	MO 63017-4608	Level of Care: ALF**	Bed Capacity 95
Mailing Address 16300 JUSTUS POST		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-4608	Region 7	Facility Number 30848
THE OAKS RETIREMENT COMMI	UNITY		
127 HAMLET ROAD		<b>Telephone</b> (417) 239-1112	Alzheimer's Unit No
BRANSON	MO 65616-7746	Level of Care: ALF**	Bed Capacity 30
Mailing Address 127 HAMLET ROAD	)	County TANEY	<b>DMH Licensed</b> No
BRANSON	MO 65616-7746	Region 1	Facility Number 27358
THE WELLINGTON SENIOR LIVI	NC		
1051 KENT STREET	10	<b>Telephone</b> (816) 222-0379	Alzheimer's Unit YES
LIBERTY	MO 64068-2257	Level of Care: ALF**	Bed Capacity 66
Mailing Address 1051 KENT STREET		County CLAY	DMH Licensed No
LIBERTY	MO 64068-2257	Region 4	Facility Number 33016
		Region	33010
THOMAS RESIDENTIAL CARE FA	CILITY 3		
1415 OLIVE ST		<b>Telephone</b> (816) 676-0390	Alzheimer's Unit No
SAINT JOSEPH	MO 64503-2443	Level of Care: RCF	Bed Capacity 20
Mailing Address 1415 OLIVE ST		County BUCHANAN	<b>DMH Licensed</b> Yes
SAINT JOSEPH	MO 64503-2443	Region 4	Facility Number 06076
TIFFANY HEIGHTS			
1531 NEBRASKA ST		<b>Telephone</b> (660) 442-3146	Alzheimer's Unit No
MOUND CITY	MO 64470-1610	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 308		County HOLT	DMH Licensed No
MOUND CITY	MO 64470-0308	Region 4 Medicare/Medicaid	Facility Number 07998
		-	

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TIFFANY SPRINGS REHABILITATION & HEALTH CARE CENTI			
9191 N AMBASSADOR DR	<b>Telephone</b> (816) 741-5570	Alzheimer's Unit	No
KANSAS CITY MO 64154-7247	Level of Care: SNF	Bed Capacity	120
Mailing Address 9191 N AMBASSADOR DR	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64154-7247	Region 4 Medicare/Medicaid	Facility Number	30748
TIFFANY SPRINGS SENIOR CARE COMMUNITY			
9101 N AMBASSADOR DRIVE	<b>Telephone</b> (816) 621-3810	Alzheimer's Unit	Yes
KANSAS CITY MO 64154-7295	Level of Care: ALF**	Bed Capacity	89
Mailing Address 9101 N AMBASSADOR DRIVE	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64154-7295	Region 4	Facility Number	31745
TIGER PLACE			
2910 BLUFF CREEK DR	<b>Telephone</b> (573) 256-4620	Alzheimer's Unit	No
COLUMBIA MO 65201-3522	Level of Care: ICF	Bed Capacity	112
Mailing Address 2910 BLUFF CREEK DR	County BOONE	DMH Licensed	No
COLUMBIA MO 65201-3522	Region 6	Facility Number	24341
00207 2022	Region 5	Tuesday Tunner	24341
TIMBERLAKE CARE CENTER			
12110 HOLMES RD	<b>Telephone</b> (816) 941-3006	Alzheimer's Unit	No
KANSAS CITY MO 64145-1707	Level of Care: SNF	Bed Capacity	122
Mailing Address 12110 HOLMES RD	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64145-1707	Region 3 Medicare/Medicaid	Facility Number	10962
TIMBERS, THE			
239 KAREN DRIVE	<b>Telephone</b> (573) 415-0390	Alzheimer's Unit	No
HOLTS SUMMIT MO 65043-2522	Level of Care: ALF**	<b>Bed Capacity</b>	50
Mailing Address 239 KAREN DRIVE	<b>County</b> CALLAWAY	DMH Licensed	No
HOLTS SUMMIT MO 65043-2522	Region 6	Facility Number	30384
TIPTON OAK MANOR			
601 WEST MORGAN ST	<b>Telephone</b> (660) 433-5574	Alzheimer's Unit	Yes
TIPTON MO 65081-8214	Level of Care: SNF	Bed Capacity	66
Mailing Address 601 WEST MORGAN ST	<b>County</b> MONITEAU	DMH Licensed	No
TIPTON MO 65081-8214	Region 6 Medicare/Medicaid	Facility Number	08036
TOWN AND COUNTRY HEALTH & REHAB			
13995 CLAYTON RD	<b>Telephone</b> (636) 227-5070	Alzheimer's Unit	Yes
TOWN AND COUNTRY MO 63017-8400	Level of Care: SNF	Bed Capacity	282
Mailing Address 13995 CLAYTON RD	County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY MO 63017-8400	Region 7 Medicare/Medicaid	Facility Number	01508
TOWNE HOUSE, THE			
221 EAST WHITLEY	<b>Telephone</b> (573) 581-2547	Alzheimer's Unit	No
MEXICO MO 65265-2815	Level of Care: RCF*	Bed Capacity	29
Mailing Address PO BOX 6	County AUDRAIN	DMH Licensed	Yes
MEXICO MO 65265-0006	Region 5	Facility Number	08077

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TOWNSHIP SENIOR LIVING, THE				
4150 WEST REPUBLIC ROAD		<b>Telephone</b> (417) 881-7800	Alzheimer's Unit	Yes
BATTLEFIELD	MO 65619-7111	Level of Care: ALF**	Bed Capacity	66
Mailing Address 4150 WEST REPUBL		County GREENE	DMH Licensed	No
BATTLEFIELD	MO 65619-7111	Region 1	Facility Number 31	1903
TIPL COLLYTY OF DE CENTER				
TRI-COUNTY CARE CENTER		TD 1 - 1 (572) 504 (467	A1 1	NT-
601 NORTH GALLOWAY RD	MO (2292 1252	Telephone (573) 594-6467 Level of Care: RCF	Alzheimer's Unit	No
VANDALIA	MO 63382-1252		Bed Capacity	20
Mailing Address 601 NORTH GALLO		County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252	Region 5	Facility Number 08	8096
TRI-COUNTY CARE CENTER				
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit	Yes
VANDALIA	MO 63382-1252	Level of Care: SNF	Bed Capacity	90
Mailing Address 601 NORTH GALLO		County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252	Region 5 Medicare/Medicaid	Facility Number 08	3096
		region - Medicare/Medicard		,0,0
TROY HOUSE RESCARE				
350 CAP AU GRIS		<b>Telephone</b> (636) 462-4915	Alzheimer's Unit	No
TROY	MO 63379-1761	Level of Care: RCF*	Bed Capacity	23
Mailing Address PO BOX 271		County LINCOLN	DMH Licensed	No
TROY	MO 63379-0271	Region 5	Facility Number 08	8129
TROY MANOR				
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit	Yes
TROY	MO 63379-2308	Level of Care: SNF	Bed Capacity	130
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed	No
TROY	MO 63379-2308	•		5397
IROI	WO 03379-2308	Region 5 Medicare/Medicaid	racinty Number 03	1397
TROY MANOR				
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit	No
TROY	MO 63379-2308	Level of Care: ALF	Bed Capacity	20
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed	No
TROY	MO 63379-2308	Region 5	Facility Number 05	5397
TRUMAN HEALTHCARE & REHAI	RII ITATION CENTED			
206 WEST FIRST ST	GILITATION CENTER	Tolophono (417) 692 5719	Alzheimer's Unit	Yes
LAMAR	MO 64759-1291	Telephone (417) 682-5718 Level of Care: SNF		123
			Bed Capacity DMH Licensed	
Mailing Address 206 WEST FIRST ST LAMAR		·		No
LAWAK	MO 64759-1291	Region 1 Medicare/Medicaid	Facility Number 01	1346
TRUMAN LAKE MANOR, INC				
600 EAST 7TH ST		<b>Telephone</b> (417) 644-2248	Alzheimer's Unit	No
LOWRY CITY	MO 64763-9671	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address PO BOX 415		County SAINT CLAIR	DMH Licensed	No
LOWRY CITY	MO 64763-0415	Region 1 Medicare/Medicaid	Facility Number 08	3140

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TRUSTWELL LIVING OF RAYTOV	WN		
9110 EAST 63RD ST		<b>Telephone</b> (816) 353-3400	Alzheimer's Unit No
RAYTOWN	MO 64133-4893	Level of Care: ALF**	<b>Bed Capacity</b> 85
Mailing Address 9110 EAST 63RD ST		County JACKSON	DMH Licensed No
RAYTOWN	MO 64133-4893	Region 3	Facility Number 24227
			•
TURNERS ROCK			
3911 EAST HIGHWAY D		<b>Telephone</b> (417) 459-4070	Alzheimer's Unit YES
SPRINGFIELD	MO 65809-	Level of Care: ALF**	
Mailing Address 3911 EAST HIGHWA			Bed Capacity 70 DMH Licensed No
SPRINGFEILD	MO 65809-	county	
SPRINGFEILD	MO 03809-	Region 1	Facility Number 32441
THE PARTY OF THE P			
TURNING POINT GROUP HOME 1720 SWOPE DR		<b>Telephone</b> (816) 257-1435	Alzheimer's Unit No
	MO 64057-2163	- · · · · · · · · · · · · · · · · · · ·	
INDEPENDENCE	MO 64057-2163		
Mailing Address PO BOX 260	MO (4051-0602	County JACKSON	DMH Licensed Yes
INDEPENDENCE	MO 64051-0693	Region 3	Facility Number 13608
TWIN OAKS AT HERITAGE POINT	PE		
228 SAVANNAH TERRACE	I E	<b>Telephone</b> (636) 542-5200	Alzheimer's Unit Yes
	MO 62295 2741	· · · · · · · · · · · · · · · · · · ·	
WENTZVILLE	MO 63385-3741		_ · · · · · · · · · · · · · · · · · · ·
Mailing Address 228 SAVANNAH TE		County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-3741	Region 5	Facility Number 26877
TWIN OAKS ESTATE, INC			
707 EMGE RD		<b>Telephone</b> (636) 542-5200	Alzheimer's Unit No
O'FALLON	MO 63366-2118	Level of Care: RCF*	Bed Capacity 149
Mailing Address 707 EMGE RD	WO 03300-2116	County SAINT CHARLES	DMH Licensed No
o .	MO 63366-2118	•	
O'FALLON	MO 03300-2118	Region 5	Facility Number 08209
TWIN PINES ADULT CARE CENTE	E <b>R</b>		
1900 S JAMISON		<b>Telephone</b> (660) 665-2887	Alzheimer's Unit Yes
KIRKSVILLE	MO 63501-5302	Level of Care: SNF	Bed Capacity 120
Mailing Address 1900 S JAMISON	1110 03301 3302	County ADAIR	DMH Licensed No
KIRKSVILLE	MO 62501 5202	•	
KIKKS VILLE	MO 63501-5302	Region 5 Medicare/Medicaid	Facility Number 08218
TWINS PLACE RESIDENTIAL CAR	RE FACILITY		
506 S MAIN STREET		<b>Telephone</b> (573) 233-8009	Alzheimer's Unit No
CHARLESTON	MO 63834-1914	Level of Care: RCF	Bed Capacity 8
Mailing Address 506 S MAIN STREE		County MISSISSIPPI	DMH Licensed No
e e		·	
CHARLESTON	MO 63834-1914	Region 2	Facility Number 32227
U-CITY FOREST MANOR			
1301 PARTRIDGE AVE		<b>Telephone</b> (314) 862-5556	Alzheimer's Unit No
SAINT LOUIS	MO 63130-1944	Level of Care: SNF	Bed Capacity 120
Mailing Address 1301 PARTRIDGE A		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63130-1944	Region 7 Medicare/Medicaid	Facility Number 15454
S. III (1 DOOL)	1.20 00100 1777	Region / Medical e/Medicald	_ ucinc _j _ tunibei

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UNION CARE CENTER		T. L. L. (626) 206 9595	All I de la Tita
1080 MARIE LANE UNION	MO 63084-1056	Telephone (636) 206-8585 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 60
Mailing Address 1080 MARIE LANE	MO 63084-1036	County FRANKLIN	Bed Capacity 60  DMH Licensed No
UNION	MO 63084-1056		Facility Number 31476
UNION	WO 03084-1030	Region 6 Medicare/Medicaid	Facility Number 314/0
UNION MANOR, LLC			
2711 NORTH UNION BLVD		<b>Telephone</b> (314) 383-7310	Alzheimer's Unit No
SAINT LOUIS	MO 63113-1003	Level of Care: RCF*	<b>Bed Capacity</b> 50
Mailing Address 2711 NORTH UNION	N BLVD	County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63113-1003	Region 7	Facility Number 11002
LIBBANA CROUD HOME			
URBANA GROUP HOME 310 WALNUT ST		<b>Telephone</b> (417) 993-4638	Alzheimer's Unit No
URBANA	MO 65767-9208	Level of Care: RCF	Bed Capacity 20
Mailing Address 310 WALNUT ST	MO 03707-7200	County DALLAS	DMH Licensed Yes
URBANA	MO 65767-9208	Region 1	Facility Number 08242
	110 03707 7200	Region 1	Tuenty Number 00242
VALLEY MANOR AND REHABILIT	TATION CENTER		
1410 HOSPITAL DR		<b>Telephone</b> (816) 637-1010	Alzheimer's Unit No
EXCELSIOR SPRINGS	MO 64024-1168	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 1410 HOSPITAL DR		County CLAY	<b>DMH Licensed</b> No
EXCELSIOR SPRINGS	MO 64024-1168	Region 4 Medicare/Medicaid	Facility Number 02425
VALLEY PARK NORTH			
2631 FAIRWAY DR		<b>Telephone</b> (573) 592-4995	Alzheimer's Unit No
FULTON	MO 65251-3936	Level of Care: RCF	<b>Bed Capacity</b> 19
Mailing Address 2631 FAIRWAY DR		County CALLAWAY	DMH Licensed No
FULTON	MO 65251-3936	Region 6	Facility Number 29982
VALLEY DADY DETENDEMENT OF	NATED.		
VALLEY PARK RETIREMENT CEN 355 KAREN DR	NIEK	<b>Telephone</b> (573) 896-0208	Alzheimer's Unit No
HOLTS SUMMIT	MO 65043-2519	Level of Care: RCF	Bed Capacity 22
Mailing Address 355 KAREN DR	110 03043 2317	County CALLAWAY	DMH Licensed No
HOLTS SUMMIT	MO 65043-2519	Region 6	Facility Number 27986
VALLEY PARK WEST			
678 WINDMILL RIDGE		<b>Telephone</b> (573) 796-2520	Alzheimer's Unit No
CALIFORNIA	MO 65018-1964	Level of Care: RCF	Bed Capacity 34
Mailing Address 678 WINDMILL RID		County MONITEAU	DMH Licensed No
CALIFORNIA	MO 65018-1964	Region 6	Facility Number 30595
VALLEY RESIDENTIAL CARE			
101 SOUTH KNOB ST		<b>Telephone</b> (573) 546-3080	Alzheimer's Unit No
IRONTON	MO 63650-1501	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 203 SOUTH WASHIN	NGTON ST	County IRON	DMH Licensed Yes

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VALLEY VIEW HEALTH & REHAB	ILITATION		
1600 EAST ROLLINS ST		<b>Telephone</b> (660) 263-6887	Alzheimer's Unit No
MOBERLY	MO 65270-2478	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 1600 E ROLLINS ST		County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-2478	Region 5 Medicare/Medicaid	Facility Number 13167
VERONICA HOUSE			
12284 DEPAUL DR		<b>Telephone</b> (314) 209-8814	Alzheimer's Unit No
BRIDGETON	MO 63044-2508	Level of Care: ALF**	Bed Capacity 100
Mailing Address 12284 DEPAUL DR		County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON	MO 63044-2508	Region 7	Facility Number 22460
VICTORIAN PLACE OF VIENNA, R	ESIDENTIAL CARE BY AMERICARI	$\Xi$	
112 PARKWAY DR		<b>Telephone</b> (573) 422-3230	Alzheimer's Unit No
VIENNA	MO 65582-8003	Level of Care: RCF	Bed Capacity 48
Mailing Address 112 PARKWAY DR		County MARIES	DMH Licensed No
VIENNA	MO 65582-8003	Region 6	Facility Number 23333
VICTORIAN PLACE OF CUBA, RES	IDENTIAL CARE BY AMERICARE		
901 HIGHWAY DD		<b>Telephone</b> (573) 885-0551	Alzheimer's Unit No
CUBA	MO 65453-8089	Level of Care: RCF	Bed Capacity 48
Mailing Address 901 HWY DD		County CRAWFORD	DMH Licensed No
CUBA	MO 65453-8089	Region 6	Facility Number 25463
VICTORIAN PLACE OF HERMANN	, RESIDENTIAL CARE BY AMERICA	RE	
2120 VILLAGE LANE	,	<b>Telephone</b> (573) 486-5060	Alzheimer's Unit No
HERMANN	MO 65041-1600	Level of Care: RCF	Bed Capacity 48
Mailing Address 2120 VILLAGE LANE		County GASCONADE	DMH Licensed No
HERMANN	MO 65041-1600	Region 6	Facility Number 24982
VICTORIAN DI ACE OF OWENSVII	LE, RESIDENTIAL CARE BY AMERI	ICADE	
301 NORTH 7TH ST	EE, RESIDENTIALE CARE DI MANERA	<b>Telephone</b> (573) 437-5396	Alzheimer's Unit No
OWENSVILLE	MO 65066-1075	Level of Care: RCF	Bed Capacity 48
Mailing Address 301 NORTH 7TH ST	110 03000-1073	County GASCONADE	DMH Licensed No
OWENSVILLE	MO 65066-1075	Region 6	Facility Number 24133
VICTORIAN DI ACE OE ST CI AID	ASSISTED LIVING BY AMERICARE		
160 CHARLES DR	ADDITED LIVING DI AMERICARE	<b>Telephone</b> (636) 322-0003	Alzheimer's Unit No
SAINT CLAIR	MO 63077-1936	Level of Care: ALF**	Bed Capacity 48
	110 03077-1730		
Mailing Address 160 CHARLES DR	MO 62077 1026	•	
SAINT CLAIR	MO 63077-1936	Region 6	Facility Number 26005
	, ASSISTED LIVING BY AMERICARI		
1250 EAST SPRINGFIELD RD		<b>Telephone</b> (573) 468-5217	Alzheimer's Unit No
SULLIVAN	MO 63080-1358	Level of Care: ALF**	<b>Bed Capacity</b> 48
Mailing Address 1250 EAST SPRINGF		County FRANKLIN	<b>DMH Licensed</b> No
SULLIVAN	MO 63080-1358	Region 6	Facility Number 26324

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VICTORIAN PLACE OF UNION, AS	SISTED LIVING BY AMERICARE		
1320 W MAIN		<b>Telephone</b> (636) 584-0085	Alzheimer's Unit No
UNION	MO 63084-1084	Level of Care: ALF**	Bed Capacity 48
Mailing Address 1320 W MAIN		County FRANKLIN	DMH Licensed No.
UNION	MO 63084-1084	Region 6	Facility Number 24408
VICTORIAN PLACE OF WASHING	TON, RESIDENTIAL CARE BY AMER	CICARE	
2800 RABBIT TRAIL DR		<b>Telephone</b> (636) 390-9500	Alzheimer's Unit No
WASHINGTON	MO 63090-6737	Level of Care: ALF**	Bed Capacity 48
Mailing Address 2800 RABBIT TRAIL	DR	County FRANKLIN	DMH Licensed No.
WASHINGTON	MO 63090-6737	Region 6	Facility Number 27659
VILLA AT BLUE RIDGE, THE			
701 BLUE RIDGE ROAD		<b>Telephone</b> (573) 474-6111	Alzheimer's Unit No
COLUMBIA	MO 65201-3734	Level of Care: SNF	Bed Capacity 97
Mailing Address 701 BLUE RIDGE RO		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-3734	Region 6 Medicare/Medicaid	Facility Number 01706
COLUMBIA	WIO 03201-3734	Region 0 Medicale/Medicald	racinty runner 01700
VILLA VENTURA ASSISTED LIVIN	G FACILITY		
12100 WORNALL RD		<b>Telephone</b> (816) 203-0345	Alzheimer's Unit No
KANSAS CITY	MO 64145-1764	Level of Care: ALF**	Bed Capacity 50
Mailing Address 12100 WORNALL RD	)	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64145-1764	Region 3	Facility Number 15614
VILLAGE ASSISTED LIVING			
1704 NORTHWEST O'BRIEN RD		<b>Telephone</b> (816) 347-2700	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care: ALF**	Bed Capacity 172
Mailing Address 1704 NORTHWEST C	D'BRIEN RD	County JACKSON	DMH Licensed No.
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number 16108
VILLAGE ASSISTED LIVING			
1701 NW O'BRIEN RD		<b>Telephone</b> (816) 347-2700	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1701 NW O'BRIEN R		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number 29258
		region 5	2,200
VILLAGE AT CARROLL PARK, TH	E		
5301 HARRY TRUMAN DR		<b>Telephone</b> (816) 761-6838	Alzheimer's Unit No
GRANDVIEW	MO 64030-1708	Level of Care: ICF	<b>Bed Capacity</b> 93
Mailing Address 5301 HARRY TRUM	AN DR	County JACKSON	DMH Licensed Yes
GRANDVIEW	MO 64030-1708	Region 3	Facility Number 03157
VILLAGE CARE CENTER, INC			
810 EAST EDWARDS ST		<b>Telephone</b> (660) 562-3515	Alzheimer's Unit No
MARYVILLE	MO 64468-2917	Level of Care: SNF	Bed Capacity 46
Mailing Address 810 EAST EDWARDS		County NODAWAY	DMH Licensed No
MARYVILLE	MO 64468-2917	Region 4 Medicare/Medicaid	Facility Number 20361
- · <del></del>	- *::** =:::	- Interior Chicaletta	20301

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VILLAGE CARE CENTER, INC					
810 EAST EDWARDS ST		Telephone	(660) 562-3515	Alzheimer's Unit	No
MARYVILLE	MO 64468-2917	Level of Care:	RCF*	Bed Capacity	18
Mailing Address 810 EAST EDWARDS			DAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2917	Region 4		Facility Number	20361
VIII I A GE GENTEEN GAND OF VIEW					
VILLAGE CENTER CARE OF WEN'	IZVILLE		(626) 227 1007		N
909 E PITMAN AVE	NO 62205 1010	Telephone	(636) 327-1907	Alzheimer's Unit	No
WENTZVILLE	MO 63385-1818	Level of Care:	ALF**	Bed Capacity	22 N
Mailing Address 909 E PITMAN AVE	MO (2205 1010		INT CHARLES	DMH Licensed	No
WENTZVILLE	MO 63385-1818	Region 5		Facility Number	28026
VILLAGE WEST, THE					
318 EAST LITTLE BRICK ROAD		Telephone	(816) 632-7611	Alzheimer's Unit	No
CAMERON	MO 64429-1231	Level of Care:	RCF*	Bed Capacity	27
Mailing Address 318 EAST LITTLE BE			KALB	DMH Licensed	No
CAMERON	MO 64429-1231	Region 4		Facility Number	18104
C.L. L.	110 0112) 1201	Region		Tuesday Transpor	10104
VILLAGE, THE					
320 EAST LITTLE BRICK RD		Telephone	(816) 632-7611	Alzheimer's Unit	No
CAMERON	MO 64429-1231	Level of Care:	RCF*	<b>Bed Capacity</b>	49
Mailing Address 320 EAST LITTLE BE	RICK RD	County DE	KALB	DMH Licensed	No
CAMERON	MO 64429-1231	Region 4		Facility Number	08945
THE A STREET OF THE STREET OF THE STREET					
VILLAGES OF JACKSON CREEK M		70.1.1.	(016) 470 5600	A1 1	<b>V</b>
19400 EAST 40TH ST COURT SOUTH		Telephone	(816) 478-5689	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64057-1548	Level of Care:	ICF	Bed Capacity	70 N-
Mailing Address 19400 EAST 40TH ST		·	CKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1548	Region 3		Facility Number	25894
VILLAGES OF JACKSON CREEK, T	гне				
3980 SOUTH JACKSON DR		Telephone	(816) 795-1433	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-2205	Level of Care:	ALF**	Bed Capacity	62
Mailing Address 3980 S JACKSON DR		County JAC	CKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-2205	Region 3		Facility Number	25709
WILL AGEG OF A CYCON CO					
VILLAGES OF JACKSON CREEK, T	тне		(016) 505 1100		
3980 SOUTH JACKSON DR		Telephone	(816) 795-1433	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-2205	Level of Care:	SNF	Bed Capacity	120
Mailing Address 3980 S JACKSON DR			CKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-2205	Region 3	Medicare/Medicaid	Facility Number	25709
VILLAGES OF ST PETERS MEMOR	RY CARE				
5300 EXECUTIVE CENTER PARKWA		Telephone	(636) 477-6955	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-3182	Level of Care:	ALF**	Bed Capacity	60
Mailing Address 5300 EXECUTIVE CE			INT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-3182	Region 5		Facility Number	29889
		O .		•	

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VILLAGES OF ST PETERS, THE				
5400 EXECUTIVE CENTRE PKWY		<b>Telephone</b> (636) 922-7600	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-2594	Level of Care: SNF	Bed Capacity	130
Mailing Address 5400 EXECUTIVE (		County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5 Medicare/Medicaid	Facility Number	26014
VII I ACEC OF ST DETERO THE				
VILLAGES OF ST PETERS, THE 5400 EXECUTIVE CENTRE PKWY		<b>Telephone</b> (636) 922-7600	Alzheimer's Unit	No
SAINT PETERS	MO 63376-2594	Level of Care: ALF**	Bed Capacity	62
Mailing Address 5400 EXECUTIVE (		County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5	Facility Number	26014
SARVITETERS	WIO 03370-2394	Region 3	racinty Number	20014
VILLAS OF JACKSON LLC THE				
670 BROADRIDGE DRIVE		<b>Telephone</b> (573) 986-8210	Alzheimer's Unit	Yes
JACKSON	MO 63755-3044	Level of Care: ALF**	<b>Bed Capacity</b>	84
Mailing Address 670 BROADRIDGE	DRIVE	County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-3044	Region 2	Facility Number	30623
	******			
VINTAGE GARDENS ASSISTED L	IVING	m 1 1 (016) 270 2220		N
3302 NORTH WOODBINE ROAD	MO (4505 0222	<b>Telephone</b> (816) 279-3330	Alzheimer's Unit	No
SAINT JOSEPH	MO 64505-9323	Level of Care: ALF**	Bed Capacity	44 N-
Mailing Address 3302 N WOODBINE		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64505-9323	Region 4	Facility Number	22959
VINTAGE GARDENS ASSISTED L	IVING			
3302 NORTH WOODBINE ROAD		<b>Telephone</b> (816) 279-3330	Alzheimer's Unit	Yes
SAINT JOSEPH	MO 64505-9323	Level of Care: ALF	<b>Bed Capacity</b>	51
Mailing Address 3302 NORTH WOO	DBINE RD	County BUCHANAN	DMH Licensed	No
SAINT JOSPEH	MO 64505-9323	Region 4	Facility Number	22959
VSL SPRINGFIELD ASSISTED LIV	VINC LLC			
1401 WEST ELFINDALE STREET	ing, LLC	<b>Telephone</b> (417) 831-3828	Alzheimer's Unit	NO
SPRINGFIELD	MO 65807-	Level of Care: ALF	Bed Capacity	50
Mailing Address 1401 WEST ELFINE		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-	Region 1	Facility Number	32492
SI NE (SI ELL)	110 03007	Region 1	ruemty rumper	32472
WAGNER RESIDENTIAL CARE, II	NC			
320 N CHAMBER DR		<b>Telephone</b> (573) 783-4511	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-7947	Level of Care: RCF	Bed Capacity	40
Mailing Address 320 N CHAMBER I	DR .	County MADISON	DMH Licensed	Yes
FREDERICKTOWN	MO 63645-7947	Region 2	Facility Number	28451
WALNUT STREET ASSISTED LIV	ING			
404 WALNUT ST		<b>Telephone</b> (573) 996-4283	Alzheimer's Unit	No
DONIPHAN	MO 63935-1420	Level of Care: ALF	Bed Capacity	35
Mailing Address 404 WALNUT ST		County RIPLEY	DMH Licensed	Yes
DONIPHAN	MO 63935-1420	Region 2	Facility Number	08354

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WARRENSBURG MANOR CARE O	CENTER			
400 CARE CENTER DR		<b>Telephone</b> (660) 747-2216	Alzheimer's Unit	No
WARRENSBURG	MO 64093-3100	Level of Care: SNF	Bed Capacity	88
Mailing Address 400 CARE CENTER		County JOHNSON	DMH Licensed	No
WARRENSBURG	MO 64093-3100	Region 3 Medicare/Medicaid	Facility Number	08383
WARRENTON MANOR				
65 STATE HIGHWAY AA		Tolonhous (626) 456 9700	Alzheimer's Unit	No
WRIGHT CITY	MO 63383-3301	Telephone (636) 456-8700 Level of Care: SNF		120
Mailing Address 65 STATE HIGHWA		Level of Care: SNF County WARREN	Bed Capacity DMH Licensed	No
WRIGHT CITY	MO 63390-3301	•		
WRIGHT CITT	MO 03390-3301	Region 6 Medicare/Medicaid	Facility Number	02505
WARSAW HEALTH AND REHABI	LITATION CENTER			
1609 SUNCHASE DR		<b>Telephone</b> (660) 438-2970	Alzheimer's Unit	Yes
WARSAW	MO 65355-3059	Level of Care: SNF	Bed Capacity	90
Mailing Address 1609 SUNCHASE D	PR .	County BENTON	DMH Licensed	No
WARSAW	MO 65355-3059	Region 6 Medicare/Medicaid	Facility Number	15243
WATERFORD LADIES HOME		m 1 1 (010 220 222		
500 NW VESPER ST	3.50 51041.0544	<b>Telephone</b> (816) 228-6337	Alzheimer's Unit	No
BLUE SPRINGS	MO 64014-2744	Level of Care: RCF	Bed Capacity	27
Mailing Address 500 NW VESPER ST		County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-2744	Region 3	Facility Number	13774
WATTS STREET MANOR				
301 WATTS ST		<b>Telephone</b> (573) 431-4874	Alzheimer's Unit	No
PARK HILLS	MO 63601-1839	Level of Care: RCF*	Bed Capacity	16
Mailing Address PO BOX 481		County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS	MO 63601-0481	Region 2	Facility Number	06579
WEBB CITY HEALTH AND REHA	RII ITATION CENTED			
2077 STADIUM DR	BILITATION CENTER	<b>Telephone</b> (417) 673-1933	Alzheimer's Unit	Yes
WEBB CITY	MO 64870-9743	Level of Care: SNF	Bed Capacity	120
Mailing Address 2077 STADIUM DR		County JASPER	DMH Licensed	No
WEBB CITY	MO 64870-9743	Region 1 Medicare/Medicaid	Facility Number	12286
WESS CITT	110 010/0 // 13	Region 1 Medicare/Medicard	ruemty rumber	12200
WEBCO MANOR				
1687 W WASHINGTON ST		<b>Telephone</b> (417) 859-5144	Alzheimer's Unit	No
MARSHFIELD	MO 65706-2325	Level of Care: SNF	Bed Capacity	120
Mailing Address 1687 W WASHINGT		County WEBSTER	DMH Licensed	No
MARSHFIELD	MO 65706-2325	Region 1 Medicare/Medicaid	Facility Number	08405
WEBWOOD ASSISTED LIVING, LI	LC			
1640 WALDO HATLER DRIVE		<b>Telephone</b> (417) 451-2997	Alzheimer's Unit	NO
NEOSHO	MO 64850-8059	Level of Care: ALF	Bed Capacity	31
Mailing Address 1640 WALDO HATI	LER DRIVE	County NEWTON	DMH Licensed	No
NEOSHO	MO 64850-8059	Region 1	Facility Number	31265
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WEDGEWOOD GARDENS				
17996 BUSINESS 13		<b>Telephone</b> (417) 272-6666	Alzheimer's Unit	Yes
REEDS SPRING	MO 65737-9663	Level of Care: ALF**	Bed Capacity	46
Mailing Address 17996 BUSINESS 13		County STONE	DMH Licensed	No
REEDS SPRING	MO 65737-9663	Region 1	Facility Number	20615
REEDS SI KING	MO 03737-9003	Region 1	racinty Number	20013
WELLER PLACE RETIREMENT C	ENTER			
510 WELLER STREET		<b>Telephone</b> (660) 395-2273	Alzheimer's Unit	No
MACON	MO 63552-1996	Level of Care: RCF	Bed Capacity	18
Mailing Address 510 WELLER STREE	ET	County MACON	DMH Licensed	No
MACON	MO 63552-1996	Region 5	Facility Number	30888
		1109-011		20000
WEST COUNTY CARE CENTER				
312 SOLLEY DR		<b>Telephone</b> (636) 391-0666	Alzheimer's Unit	NO
BALLWIN	MO 63021-5248	Level of Care: SNF	Bed Capacity	137
Mailing Address 312 SOLLEY DR		County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-5248	Region 7 Medicare/Medicaid	Facility Number	04970
WEST PINE GROUP HOME				
4232 WEST PINE BLVD		<b>Telephone</b> (314) 531-9450	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2840	Telephone (314) 531-9450 Level of Care: RCF	Bed Capacity	9
Mailing Address 4232 WEST PINE BI		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2840	Region 7	Facility Number	05948
SARVI LOUIS	WIO 03100-20 <del>4</del> 0	Region /	racinty Number	03946
WEST VUE NURSING AND REHAB	SILITATION CENTER			
210 DAVIS DR		<b>Telephone</b> (417) 256-2152	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-2241	Level of Care: SNF	Bed Capacity	130
Mailing Address 210 DAVIS DR		County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-2241	Region 1 Medicare/Medicaid	Facility Number	21733
WESTBROOK CARE CENTER, INC	2			
401 S PLATTE CLAY WAY		<b>Telephone</b> (816) 628-2222	Alzheimer's Unit	No
KEARNEY	MO 64060-7714	Level of Care: RCF*	Bed Capacity	27
Mailing Address 401 S PLATTE CLA	Y WAY	County CLAY	DMH Licensed	No
KEARNEY	MO 64060-7714	Region 4	Facility Number	19757
WF9777700				
WESTBROOK TERRACE - ASSIST	ED LIVING BY AMERICARE	m 1 1 (570) 505 0500		3.7
3335 NORTH TEN MILE DR		<b>Telephone</b> (573) 635-2600	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-0528	Level of Care: ALF**	Bed Capacity	36 N
Mailing Address 3335 NORTH TEN M		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0528	Region 6	Facility Number	20440
WESTBURY SENIOR LIVING THE				
550 STONE VALLEY PARKWAY		<b>Telephone</b> (573) 818-7030	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-5567	Level of Care: ALF**	Bed Capacity	66
Mailing Address 550 STONE VALLE	Y PARKWAY	County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-5567	Region 6	Facility Number	32666

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WESTCHESTER HOUSE, THE		T. I	
550 WHITE RD	MO (2017 2016	<b>Telephone</b> (314) 469-1200	Alzheimer's Unit No
CHESTERFIELD	MO 63017-2316	Level of Care: SNF	Bed Capacity 159
Mailing Address 550 WHITE RD	MO (2017 2016	County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-2316	Region 7 Medicare/Medicaid	Facility Number 08474
WESTFIELD NURSING CENTER, I	NC		
3144 STATE HIGHWAY FF		<b>Telephone</b> (573) 471-1174	Alzheimer's Unit No
SIKESTON	MO 63801-8580	Level of Care: SNF	Bed Capacity 82
Mailing Address PO BOX 489	WO 03001 0300	County NEW MADRID	DMH Licensed No
SIKESTON	MO 63801-0489	Region 2 Medicare/Medicaid	Facility Number 07306
SIKESTON	WO 03001-040)	Region 2 Medicare/Medicaid	racinty Number 07300
WESTGATE			
3130 JOHN DUFFY DR		<b>Telephone</b> (417) 553-3688	Alzheimer's Unit Yes
JOPLIN	MO 64804-1569	Level of Care: SNF	Bed Capacity 120
Mailing Address 3130 JOHN DUFFY 1	DR	County JASPER	DMH Licensed No
JOPLIN	MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number 31754
			•
WESTPORT ESTATES - ASSISTED	LIVING BY AMERICARE		
904 APACHE DR		<b>Telephone</b> (660) 886-5500	Alzheimer's Unit Yes
MARSHALL	MO 65340-2900	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 904 APACHE DR		County SALINE	DMH Licensed No
MARSHALL	MO 65340-2900	Region 5	Facility Number 16202
WESTVIEW AT ELLISVILLE ASSIS	STED LIVING	m 1 1 (50 5) 505 555 1	
27 REINKE RD		<b>Telephone</b> (636) 527-5554	Alzheimer's Unit Yes
ELLISVILLE	MO 63021-4734	Level of Care: ALF**	Bed Capacity 99
Mailing Address 27 REINKE RD	3.00 (2004) 4504	County SAINT LOUIS COUNTY	DMH Licensed No
ELLISVILLE	MO 63021-4734	Region 7	Facility Number 28184
WESTVIEW NURSING HOME			
301 WEST DUNLOP ST		<b>Telephone</b> (573) 267-3920	Alzheimer's Unit No
CENTER	MO 63436-2267	Level of Care: SNF	Bed Capacity 60
Mailing Address 301 WEST DUNLOP		County RALLS	DMH Licensed No
CENTER	MO 63436-2267	Region 5 Medicare/Medicaid	Facility Number 15634
CLATER		region 5 incurcare/incurcare	1303
WESTWOOD HILLS HEALTH & R	EHABILITATION CENTER		
3100 WARRIOR LN		<b>Telephone</b> (573) 785-0851	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-8686	Level of Care: SNF	Bed Capacity 132
Mailing Address 3100 WARRIOR LAN	NE	County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-8686	Region 2 Medicare/Medicaid	Facility Number 08512
WEVEODD DI ACE ACCIONED I IVI	INC AND MEMODY SUDDODE BY SE	NIOD STAD	
6460 NORTH COSBY AVE	ING AND MEMORY SUPPORT BY SE	Telephone (816) 743-4259	Alzheimer's Unit Yes
KANSAS CITY	MO 64151-2377	Level of Care: ALF**	Bed Capacity 98
Mailing Address 6460 NORTH COSB		County PLATTE	DMH Licensed No
KANSAS CITY	MO 64151-2377	•	
KAINSAS CITT	WIO 04131-2377	Region 4	Facility Number 28861

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WHICHEDING OAKS DOE H. L.C.			
WHISPERING OAKS RCF II, LLC 203 NORTH B ST		<b>Telephone</b> (573) 686-4490	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-5413	Level of Care: RCF*	Bed Capacity 45
Mailing Address 203 NORTH B ST	WO 03701-3413	County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-5413		Facility Number 16751
POPLAR BLUFF	WO 03901-3413	Region 2	Facility Number 16/51
WHISPERING PINES SENIOR LIVI	NG LLC		
4904 EAST WELLRIDGE LN		<b>Telephone</b> (417) 781-0099	Alzheimer's Unit No
JOPLIN	MO 64801-8793	Level of Care: RCF*	Bed Capacity 20
Mailing Address 4904 EAST WELLRI		County JASPER	DMH Licensed No
JOPLIN	MO 64801-8793	Region 1	Facility Number 09477
WHITE OAK ACCIOTED I WING			
WHITE OAK ASSISTED LIVING 1515 WEST WHITE OAK		<b>Telephone</b> (816) 254-3500	Alzheimer's Unit No
INDEPENDENCE	MO 64050-2557	Level of Care: ALF**	Bed Capacity 78
Mailing Address 1515 WEST WHITE		County JACKSON	DMH Licensed No
INDEPENDENCE	MO 64050-2557	Region 3	Facility Number 06604
INDELENDENCE	WO 04030-2337	Region 3	Facility Number 00004
WILD-KAT ESTATES, LLC			
300 WEST FAIRVIEW STREET		<b>Telephone</b> (660) 728-2301	Alzheimer's Unit No
KING CITY	MO 64463-9606	Level of Care: ALF	Bed Capacity 24
Mailing Address 300 WEST FAIRVIE	W STREET	County GENTRY	DMH Licensed No
KING CITY	MO 64463-9606	Region 4	Facility Number 04305
WILDWOOD SENIOR LIVING THE			
3002 SOUTH JOHN DUFFY DRIVE		<b>Telephone</b> (417) 623-2233	Alzheimer's Unit Yes
JOPLIN	MO 64804-1656	Level of Care: ALF**	Bed Capacity 74
Mailing Address 3002 SOUTH JOHN		County JASPER	<b>DMH Licensed</b> No
JOPLIN	MO 64804-1656	Region 1	Facility Number 31370
WILLARD CARE CENTER		TEMPORARY CLO	SURE - STAFFING
400 WEST WALNUT LN		<b>Telephone</b> (417) 742-3593	Alzheimer's Unit Yes
WILLARD	MO 65781-9432	Level of Care: SNF	Bed Capacity 66
Mailing Address 400 W WALNUT LN		County GREENE	DMH Licensed No
WILLARD	MO 65781-9432	Region 1 Medicare/Medicaid	Facility Number 16393
WILLOW BROOKE - ASSISTED LI	VING BY AMERICARE		
#1 NORTH POTOMAC CT		<b>Telephone</b> (636) 583-2799	Alzheimer's Unit No
UNION	MO 63084-1113	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1 NORTH POTOMA	.C CT	County FRANKLIN	<b>DMH Licensed</b> No
UNION	MO 63084-1113	Region 6	Facility Number 13596
WILLOW CADE MURGING HOLE			
WILLOW CARE NURSING HOME 2646 STATE ROUTE 76		<b>Telephone</b> (417) 469-3152	Alzheimer's Unit Yes
WILLOW SPRINGS	MO 65793-8254	Telephone (417) 469-3152 Level of Care: SNF	Bed Capacity 105
Mailing Address PO BOX 309	1120 03173-0234	County HOWELL	DMH Licensed No
_		•	
WILLOW SPRINGS	MO 65793-0309	Region 1 Medicare/Medicaid	Facility Number 08614

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WILLOW WEST APARTMENTS				
2644 STATE ROUTE 76		<b>Telephone</b> (417) 469-3152	Alzheimer's Unit	No
WILLOW SPRINGS	MO 65793-8254	Level of Care: ALF	<b>Bed Capacity</b>	36
Mailing Address PO BOX 309		County HOWELL	DMH Licensed	No
WILLOW SPRINGS	MO 65793-0309	Region 1	Facility Number	08614
WILCHIDE AT LAVEWOOD DELL	AD CENTED			
WILSHIRE AT LAKEWOOD REHA 600 NE MEADOWVIEW DR	AB CENTER	<b>Telephone</b> (816) 554-9866	Alahaiman'a Unit	No
LEE'S SUMMIT	MO 64064-1983	Telephone (816) 554-9866 Level of Care: SNF	Alzheimer's Unit Bed Capacity	170
Mailing Address 600 NE MEADOWV			DMH Licensed	No
LEE'S SUMMIT	MO 64064-1983	2 0 00000	Facility Number	22471
LEES SUMMIT	WO 04004-1963	Region 3 Medicare/Medicaid	racinty Number	22471
WILSON'S CREEK NURSING & RI	EHAB			
3403 WEST MT VERNON		<b>Telephone</b> (417) 864-5600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	Bed Capacity	172
Mailing Address 3403 WEST MT VE		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number	05579
WINCHESTER NURSING CENTER	R, INC			
400 WINCHESTER DRIVE		<b>Telephone</b> (573) 293-6702	Alzheimer's Unit	No
BERNIE	MO 63822-7500	Level of Care: SNF	Bed Capacity	44
Mailing Address PO BOX 760		County STODDARD	DMH Licensed	No
BERNIE	MO 63822-0760	Region 2 Medicare/Medicaid	Facility Number	31391
WINCHESTER PLACE ASSISTED	LIVING, LLC			
404 WINCHESTER ROAD		<b>Telephone</b> (573) 293-6705	Alzheimer's Unit	No
BERNIE	MO 63822-7500	Level of Care: ALF**	Bed Capacity	38
Mailing Address PO BOX 760		County STODDARD	DMH Licensed	No
BERNIE	MO 63822-0760	Region 2	Facility Number	24912
WINDEMERE HEALTHCARE CEN	NTER LLC			
3100 NORTH WEST VIVION RD		<b>Telephone</b> (816) 741-0753	Alzheimer's Unit	NO
RIVERSIDE	MO 64150-9436	Level of Care: RCF	Bed Capacity	65
Mailing Address 3100 NORTH WES		County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-9436	Region 4	Facility Number	08668
WINDSOR ESTATES OF ST CHAR	LES SNAL, LLC			
2150 WEST RANDOLPH ST		<b>Telephone</b> (636) 946-4966	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-0894	Level of Care: SNF	Bed Capacity	66
Mailing Address 2150 WEST RANDO		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-0894	Region 5 Medicare/Medicaid	Facility Number	06316
WINDSOR ESTATES OF ST CHAR	LES SNAL, LLC	m 1 1		
2150 WEST RANDOLPH ST	MO (2201 0004	<b>Telephone</b> (636) 946-4966	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63301-0894	Level of Care: ALF**	Bed Capacity	90 N
Mailing Address 2150 WEST RANDO SAINT CHARLES	MO 63301-0894	County SAINT CHARLES	DMH Licensed Facility Number	No
		Region 5	Focility Number	06316

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^{*} Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

^{**} Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

WINDSOR HEALTHCARE & REHA	AB CENTER			
809 WEST BENTON		<b>Telephone</b> (660) 647-3102	Alzheimer's Unit	No
WINDSOR	MO 65360-1239	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 5		County HENRY	DMH Licensed	No
WINDSOR	MO 65360-0005	Region 1 Medicare/Medicaid	Facility Number	21715
WINFIELD RESIDENTIAL CARE				
220 WEST WALNUT ST		<b>Telephone</b> (636) 668-8110	Alzheimer's Unit	No
WINFIELD	MO 63389-1122	Level of Care: RCF	Bed Capacity	20
Mailing Address 220 WEST WALNUT		County LINCOLN	DMH Licensed	Yes
WINFIELD	MO 63389-1122		Facility Number	08729
WINTELD	WIO 03389-1122	Region 5	racinty Number	08729
WOOD OAKS, INC				
1804 SOUTH STERLING AVE		<b>Telephone</b> (816) 254-5400	Alzheimer's Unit	No
INDEPENDENCE	MO 64052-3845	Level of Care: RCF*	Bed Capacity	30
Mailing Address PO BOX 520049		County JACKSON	DMH Licensed	Yes
INDEPENDENCE	MO 64052-0049	Region 3	Facility Number	02389
WOODLAND MANOR				
1347 EAST VALLEY WATERMILL RD		<b>Telephone</b> (417) 833-1220	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3739	Level of Care: SNF	Bed Capacity	180
Mailing Address 1347 EAST VALLEY		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3739			
SPRINGFIELD	MO 03803-3739	Region 1 Medicare/Medicaid	Facility Number	05794
WOODLAND MANOR NURSING CENTER				
100 WOODLAND COURT		<b>Telephone</b> (636) 296-1400	Alzheimer's Unit	No
ARNOLD	MO 63010-2030	Level of Care: SNF	Bed Capacity	178
Mailing Address 100 WOODLAND CT		County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-2030	Region 2 Medicare/Medicaid	Facility Number	12549
WODEN CONNEY CONVALECTE	WE CENTED			
WORTH COUNTY CONVALESCEN	NI CENIEK	T-11	A1-1	N.
503 E 4TH ST	MO (445) 02(2	<b>Telephone</b> (660) 564-3304	Alzheimer's Unit	No
GRANT CITY	MO 64456-8363	Level of Care: SNF	Bed Capacity	50
Mailing Address 503 E 4TH ST		County WORTH	DMH Licensed	No
GRANT CITY	MO 64456-8363	Region 4 Medicare/Medicaid	Facility Number	08779

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